

Bishop DuBourg High School Student Release of Information (Please give to an administrator at your current school.)

Student	's Name						
		First	Middle		Last		
Grade fo	or which applyir	ng9 th	_10 th 11 th	12 th	Semester		
applicat						to complete the ested by Bishop	
Please 1	forward the follo	owing information	on to Bishop DuB	ourg Hig	h School:		
1.	The attached Student Recommendation Form						
2.	. Scholastic Achievement Data (transcripts, report cards, grades, credits, etc.)						
3.	3. Standardized Test Scores						
4.	Attendance an	nd Discipline Da	ata				
5.	Immunization	and Health Da	a				
6.	Psychological	Data (including	g diagnosis and IE	EP)			
7.	Federal and S	tate Constitutio	n Test Scores				
Please	send the inform	ation to:					
Attr 585 St.	hop DuBourg H n: Admissions' (60 Eichelberger Louis, MO 631 OR (to (314) 832-0	Committee 09					
Parent's	s Signature				Date		



Bishop DuBourg High School Student Recommendation

(Please give to an administrator at your current school.)

Student's Name						
	First		Middle	Middle		
Grade for which applying	9 th	10 th	11 th	12 th	Semester	

Please complete both sides of this recommendation for the student listed above who is seeking admission to Bishop DuBourg High School. Please send this recommendation and the additional school data to the Admissions' Committee of Bishop DuBourg High School.

We would appreciate your observations about the areas listed below. You may indicate your ratings by writing a number (1 to 5) in the right-hand column. Please use a question mark where you have insufficient evidence on which to make a judgment.

Areas	1	2	3	4	5	Your Rating
Academic Ability	Exceptional student, high honors	Fine student, but not high honors	Capable of passing work	Marginal ability	Poor academic risk	
Extra-Curricular Activities	Outstanding leader in several activities	Real contributor in many activities	Fairly active in a few activities	Minor participation in activities	No involvement in activities	
Integrity	Exceptionally trustworthy, dependable	Noticeably trustworthy	No cause to question	Weak or questionable	Record of dishonesty	
Conduct	Excellent student in every aspect	Respectful and follows rules	Average or acceptable behavior	Some unacceptable behaviors	Poor impression, does not follow rules	
Initiative and Drive	Excellent motivation and self- directed	Above average motivation and direction	Average motivation and direction	Low motivation, needs direction	Unmotivated, no direction	
Peer relationships	Excellent concern and respect for others, liked by all	Concern and respect for others, well liked	Average concern for others, liked by a small group	Few close relationships with others	Does not get along with others	
Recommendation as a student	Excellent	Above average	Average	Fair	Poor	

Continued on the next page.

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We would appreciate receiving your answers to the following questions that relate to the applicant. Additional comments may be written on the bottom of this form.

1.	Is the student in good standing and eligible to return to your school at the next grade level? □Yes □ No					
2.	Has the student been involved with alcohol or drugs? ☐ Yes ☐ No					
3.	Has any disciplinary action been taken with the student? ☐ Yes ☐ No					
4.	Does the student have any physical, social or emotional limitations? □Yes □No					
5.	Are there any attendance concerns with this student? □Yes □No					
6.	Are the parents cooperative? □Yes □No					
7.	Does the family meet its financial responsibilities for school bills in a timely manner? □Yes □No □ Not applicable					
8.	Do you wish to discuss this student in more detail over the phone? □Yes □No					
	use the bottom of this form to make further comments if needed. You may ask a teacher who be candidate to make additional comments. Thank you for your assistance.					
Signature	e Date					
Printed N	NameTitle					
School _	Phone Number					
Address						
	State Zip					
COMME	NTS:					