



NOTRE DAME HIGH SCHOOL

WEST HAVEN

In the Holy Cross Tradition

- Early Application**
Deadline: Nov. 7, 2011
- Regular Application**
Deadline: Nov. 28, 2011
- Rolling Admission Application**
Deadline: One week after receiving this form
- Transfer Application**
Deadline: One week after receiving this form

PRINCIPAL/GUIDANCE COUNSELOR RECOMMENDATION

Date _____

Instructions

To Student : Please give to either your Principal or Guidance Counselor along with a stamped envelope. They will complete this form and return it to Notre Dame High School. (See deadline above.)

To Parent/Guardian : I give my permission for my son's current school to release my son's records to Notre Dame High School. These records may include identifying information, date of entry and withdrawal, previous school attended, attendance information, scholastic grades, standardized test information, and special education information, if applicable. I also hereby waive my rights of access under The Family Education Rights and Privacy Act of 1974 to specific and composite letters of recommendation.

Parent/Guardian Signature

To Respondent : This student is applying for admission to Notre Dame High School of West Haven. Notre Dame is a Catholic college preparatory school for young men. The application **CANNOT** be processed without this information.

Last Name _____
First Name _____
Middle Name

Current School _____
School Phone Number

Address _____
Town/City _____
State _____
Zip

Student is applying for admission as: Freshman Sophomore Junior Senior

Personal

	No Basis for Judgment	Excellent	Good	Average	Below Average
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with Adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Academic

	No Basis for Judgment	Excellent	Good	Average	Below Average
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

▶ How long have you known this student? _____

▶ In what capacity? _____

▶ Does this student have a diagnosed Learning Disability, 504 Modification Plan, and/or Attention Deficit Disorder (with or without hyperactivity)? Yes No

If so, please explain _____

▶ Has the applicant ever been disciplined in your school or the community for serious misconduct? Yes No

If so, please explain _____

▶ Additional comments _____

Recommendation

- I strongly recommend this applicant with enthusiasm and without reservation.
- I recommend this applicant.
- I have reservations about recommending this applicant.
- I do not recommend this applicant.

Name

Title

Signature

Date

Daytime Phone

Please complete and return to:

Director of Admissions
Notre Dame High School
24 Ricardo Street
West Haven, Connecticut 06516