

SAGE RIDGE SCHOOL



Teacher Recommendation

Student/SRS Applicant's Name _____

Parent/Guardian Name(s) _____

Date _____ Applying to Grade _____

To the Parent: Please type or print the above information and give this form to the student's current teacher with a stamped envelope addressed to Sage Ridge School.

To the Teacher: Sage Ridge School is a non-profit, independent school committed to a rigorous academic curriculum in a supporting environment, and seeks a student body representative of the diverse population of the Truckee Meadows. With this information in mind, please complete the form below. Please send your completed recommendation directly to the school. This recommendation will remain confidential and will not become part of the student's permanent record. We sincerely appreciate your cooperation and candor.

LEARNING SKILLS

Describe this student's:

1. Willingness to try new activities

2. Ability to focus on and complete a task

3. Ability to work in groups

4. Ability to work independently

Describe this student's most important accomplishment in your classroom.

2515 Crossbow Court
Reno, NV 89511

Tel 775-852-6222
Fax 775-852-6228

www.sageridge.org

Personal Skills

Describe this student's:

- 5. Attitude toward him/herself

- 6. Ability to resolve conflict

- 7. Ability to develop friendships

- 8. Ability to use criticism for growth

Describe the areas (academic or personal) most needing support or adult intervention.

Describe the family's contributions to the school community.

Is there additional information that can be conveyed better in a phone conversation? Yes No

When did you teach the applicant? Dates: From _____ To _____

Signature _____ School _____

Your name (print) _____ Address _____

Position _____ Phone _____

Grade/Subject _____ Date _____

SAGE RIDGE SCHOOL



Teacher/Principal Recommendation

Student/SRS Applicant's Name _____

Parent/Guardian Name(s) _____

Date _____ Applying to Grade _____

To the Parent: Please type or print the above information and give this form to the student's current teacher/principal with a stamped envelope addressed to Sage Ridge School.

To the Teacher/Principal: Sage Ridge School is a non-profit, independent school committed to a rigorous academic curriculum in a supporting environment, and seeks a student body representative of the diverse population of the Truckee Meadows. With this information in mind, please complete the form below. Please send your completed recommendation directly to the school. This recommendation will remain confidential and will not become part of the student's permanent record. We sincerely appreciate your cooperation and candor.

LEARNING SKILLS

Describe this student's:

1. Willingness to try new activities

2. Ability to focus on and complete a task

3. Ability to work in groups

4. Ability to work independently

Describe this student's most important accomplishment in your classroom/at your school.

Personal Skills

Describe this student's:

- 5. Attitude toward him/herself

- 6. Ability to resolve conflict

- 7. Ability to develop friendships

- 8. Ability to use criticism for growth

Describe the areas (academic or personal) most needing support or adult intervention.

Describe the family's contributions to the school community.

Is there additional information that can be conveyed better in a phone conversation? Yes No

How long have you known the applicant? Dates: From _____ To _____

Signature _____ School _____

Your name (print) _____ Address _____

Position _____ Phone _____

Grade/Subject _____ Date _____

SAGE RIDGE SCHOOL



Teacher/Coach Recommendation

Student/SRS Applicant's Name _____

Parent/Guardian Name(s) _____

Date _____ Applying to Grade _____

To the Parent: Please type or print the above information and give this form to the student's current teacher/coach with a stamped envelope addressed to Sage Ridge School.

To the Teacher/Coach: Sage Ridge School is a non-profit, independent school committed to a rigorous academic curriculum in a supporting environment, and seeks a student body representative of the diverse population of the Truckee Meadows. With this information in mind, please complete the form below. Please send your completed recommendation directly to the school. This recommendation will remain confidential and will not become part of the student's permanent record. We sincerely appreciate your cooperation and candor.

LEARNING SKILLS

Describe this student's:

1. Willingness to try new activities

2. Ability to focus on and complete a task

3. Ability to work in groups

4. Ability to work independently

Describe one of this student's important accomplishments:

Personal Skills

Describe this student's:

5. Attitude toward him/herself

6. Ability to resolve conflict

7. Ability to develop friendships

8. Ability to use criticism for growth

Describe the areas (academic or personal) most needing support or adult intervention.

Describe the family's contributions to the school (club, team, etc.) community.

Is there additional information that can be conveyed better in a phone conversation? Yes No

How long have you known the applicant? Dates: From _____ To _____

Signature _____ School _____

Your name (print) _____ Address _____

Position _____ Phone _____

Grade/Subject _____ Date _____

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Request for Student Records Form

To the Applicant:

Submit this request to your current school. DO NOT SEND this form to Sage Ridge School. Complete all the information below before submitting this request. Your current school will provide an official transcript to Sage Ridge School.

To the School:

The student named below has applied for admission to (or will be attending) Sage Ridge School. Please provide student records as indicated below.

Last Name of Student Initial	First Name	Middle
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Social Security #	Date of Birth
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Please send:

- ♦ Current academic records (see below) for admission
A complete transcript should include:
 - ♦ Academic records for at least the past two years
 - ♦ Any available test scores

Please send records to:
Sage Ridge School
Admissions
2515 Crossbow Court
Reno, NV 89511

I hereby authorize the release of the information specified above to Sage Ridge School.

Signature of parent or Guardian	Date
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