



Rabbi Oscar Z.  
**Fasman Yeshiva High School**  
 7135 North Carpenter Road, Skokie, Illinois 60077  
 (847) 982-2500 FAX (847) 674-6381 www.HTC.edu

### Principal's Recommendation Form for Application

**To the Applicant:** Please complete the portion above the dotted line and then give this form to the individual making the recommendation.

Name of Applicant: \_\_\_\_\_

Home Address: \_\_\_\_\_

**To the individual completing this Recommendation Form:** Thank you very much for completing this form. We believe that your evaluation of the above named applicant is an important component in our admissions decision. We appreciate you taking the time to help us in this process. **Please complete this form, seal it in an envelope and return to the applicant to include in the application packet.**

Your Name: \_\_\_\_\_

How long and in what capacity have you known the Applicant: \_\_\_\_\_

Name of Your Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Please evaluate the applicant using the grid below:

Student's Traits	Below Average	Average	Good	Very Good	Excellent (Top 5%)
Religious Observance					
Consideration/Relation for others					
Motivation					
Sense of Responsibility					
Attendance/Punctuality					
Desire for Academic Growth					
Emotional Stability					
Effort/Participation					
Scholastic Ability					

Please rate academic ability using the grid below based upon teacher evaluation.

Area of Study	Below Average	Average	Good	Very Good	Excellent (Top 5%)
Gemara					
Chumash					
Navi					
Ivrit					
English					
Math					
Science					
Social Studies					

Please answer the following questions focusing on the student's academic potential, character, maturity and readiness for undertaking a rigorous academic program.

Your observations of the student's outstanding strengths:

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Your observations of the student's weaknesses:

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Your observations of the student's social skills:

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Your observations of the student's academic skills:

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Highly recommend

Recommend

Cannot recommend

this applicant for admission to Fasman Yeshiva High School.

\_\_\_\_\_  
Signature of recommender

\_\_\_\_\_  
Date

Note to Recommender: Please feel free to use additional pages if necessary.