



# TEACHER RECOMMENDATION FOR EARLY CHILDHOOD PROGRAM

CATHEDRAL SCHOOL OF SAINT MARY  
910 SAN JACINTO BLVD., AUSTIN, TEXAS 78701  
(512) 476-1480 • WWW.SMCSCHOOLAUSTIN.ORG

**Parent or Guardian:** Please read and sign before giving this to your child's teacher.

I understand and agree that the information provided in this form is confidential and will be used only in the selection of candidates. I also agree that this completed form will not be available to candidates, parents, or anyone else outside Cathedral School of Saint Mary Admissions office and I waive any right that I may have to see it.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Name of applicant / student: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Entering grade: \_\_\_\_\_

I/We \_\_\_\_\_ acknowledge that my/our child

\_\_\_\_\_ Has attended a full-time pre-school

\_\_\_\_\_ Has not been enrolled in a pre-school

\_\_\_\_\_ Has only been enrolled in a Mother's Day Out program

\_\_\_\_\_ Has been enrolled in a part-time pre-school

\_\_\_\_\_ Has had an individual sitter/nanny

Name & address of pre-school: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Teacher/Care Provider:** The student named above is a candidate for admission for Early Childhood at Cathedral School of Saint Mary. Please complete this recommendation and send both pages directly to the school to the attention of Esmeralda L. Hoang, Advancement & Admissions Director by fax at 512-476-9922, via email to [ehoang@cssmaustin.org](mailto:ehoang@cssmaustin.org) or by mail at 910 San Jacinto Blvd. Austin, TX 78701.

Student's Name: \_\_\_\_\_

Entering Grade: \_\_\_\_\_

To be completed by pre-school teacher, sitter, or care provider.

Social & Personal Development	Satisfactory	In Transition	Needs Attention
Separates from parents without difficulty			
Is secure and happy at school			
Makes activity choices without teachers help			
Shares toys and materials			
Is able to control his/her behavior			
Can express anger in words rather than action			
Communicates in complete sentences			
Articulates in a manner that is understandable to adults and peers			
<b>Self-Help Skills</b>			
Can take care of personal needs (restroom)			
Uses appropriate manners at lunch/snack time			
<b>Motor Skills</b>			
Works well with paints, blocks, clay, crayons, and markers			
Can run, throw and catch a ball, climb, exhibits proper balance			
Confidently attempts new activities			

If you answered "Needs Attention" to any of the above, please comment.

---

---

---

Is this child ready for a full five day program? Please explain.

---

---

---

Please attach a sample of the child's work. Include an example of their drawing, coloring and handwriting.

**TEACHER RECOMMENDATION** Check one

\_\_\_\_ I highly recommend

\_\_\_\_ I recommend

\_\_\_\_ I do not recommend

Comments: \_\_\_\_\_

---

---

Printed name of teacher/care provider completing this form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_