



60 A.M.S. Circle · Burnsville, NC 28714
(828) 675-4262 · FAX (828) 675-0003
e-mail: info@arthurmorganschool.org

ADMISSIONS REFERENCE FORM

To the person filling out this form, please answer these questions on behalf of

_____ (Name of Student)

and return this form to Admissions, The Arthur Morgan School at the address listed above. Please do not hesitate to call us should you have questions about this form. Thank you for taking the time to share information & insight with us.

Today's Date: _____

Your name: _____

Your relationship to this student: _____

How long have you known this student? _____

- 1) What are the first words that come to mind when describing this student?
- 2) Is this student a discipline problem for you or for others? (Please describe.)
- 3) Is she/he likely to be distracted or to distract others in class?
- 4) In terms of the social peer group, is this student influential as a leader (positively or negatively)?
- 5) Is this student outcast by her/his peers?
- 6) Have you ever suspected this student may be under the influence of drugs or alcohol?
- 7) Does this student have a learning disability? (Please describe.)
- 8) How self-motivated do you feel this student could be in an academic program that involves some independent work?
- 9) Are his/her parents involved in your school? (Please describe.)
- 10) Please comment on this students writing ability or math competence, if applicable.

We would appreciate additional comments and observations concerning this student's strengths, weaknesses, health or special needs. We welcome any other information that you think may be helpful in the admissions process.

For the following areas please check the box you feel is most applicable to this student.

	Excellent	Good	Fair	Poor
consideration for others				
consideration for environment				
self-respect				
self-confidence				
emotional maturity				
sense of humor				
integrity				
sense of responsibility				
relationship with adults				
study habits				
intellectual curiosity				
attention span				
ability to follow directions				
perseverance				
parent relationship				

Your signature: _____

Your work phone (in case we have questions): _____

Thank you again for filling out this form! Please return it to:

Admissions, Arthur Morgan School
60 AMS Circle,
Burnsville, North Carolina 28714