(Please give to a teacher, principal, or guidance counselor of previously attended school. This form must be filled out and returned to MRA before application can be considered.)

Recommendation Form

Name of Applicant:
The student whose name appears above is a candidate for admission to Mount Royal Academy. We recognize that teachers and counselors play an important role in the educational life of individual students. As the directors of the applicant's school, we thank you for your cooperation and candid comments. Please describe the aforementioned student with regards to the following:
1. Study habits: (industry, perseverance, initiative, promptness, ability to organize)
2. Academic achievement in relation to student's ability:
3. Personality and character: (leadership, sense of humor, integrity, responsibility, respect for others, eotional stability)
4. Are there any aspects of the student of which we should be aware?
5. Comments:
6. Student's Conduct: (excellent, good, acceptable, poor, unacceptable)
Name: Signature:
Relationship to student:
School:
Address:
Telephone:

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