

Holland Medical High School

2442 Cedar Street • Abilene, Texas 79601 • 325-794-4120

www.abileneisd.org/hollandmedhs

2021-2022 Recommendation for HMHS Applicant

Section G: Teacher Recommendation

This section to be completed by Applicant, then given to a current Math, English, Science or Social Studies teacher.

Student Name _____

Student ID # _____

The student named above is applying for admission to Holland Medical High School. Holland is a medical magnet program that offers multiple Health Science classes geared to earning State and National medical certifications to AISD Juniors and Seniors. Holland students are expected to work hard and be a good representation of Holland and AISD in the classroom and clinical setting. A forthright evaluation is extremely helpful in choosing from among highly qualified candidates. Thank you for your assistance. **Return this completed form in a sealed and signed envelope to the student to be returned with the application.**

1. How long have you known the applicant?

2. Please list the courses you have taught this applicant:

3. Please assess this applicant's love of learning, capacity for independent work, and contribution to class discussion.

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Teacher

Section G: Teacher Recommendation (continued)

4. Every student has individual habits of study, patterns of development, and occasional difficulties. What can you tell us about the applicant in this regard?

5. In comparison to other students in his/her grade, please rate the applicant on the following criteria:

	No Basis	Poor	Average	Very Good	Excellent
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

6. Does the student have a history of disciplinary concerns? Major Minor Please explain:

7. Please check below and explain if needed:

_____ I recommend this candidate without reservations

_____ I recommend this candidate with reservations

_____ I do not recommend this candidate

Name _____ Position _____

Signature _____ Date _____

Please place this completed form in a sealed envelope and return to the student to be turned in with their application. The signed and sealed recommendation forms **MUST** be sent with the application.

Applications are due by at Holland no later than the end of the school day on **March 4, 2021**

Holland Medical High School

Attn: Application

Box 16135

Abilene, TX 79698-6135