

Student's Last Name: _____ First Name _____

TEACHER RECOMMENDATION

Recommendations must be obtained from the student's English, math, science or social studies faculty, at the school he/she presently attends.

Alaska Middle College School (AMCS) is an academic program intended to allow students to take college courses at the University of Alaska Anchorage. College-ready students are enrolled in college courses with adult college students in addition, high school classes are taught on campus. AMCS students must demonstrate the ability to make mature, independent, and responsible choices to succeed in college.

School Personnel: Please return your recommendation to the student in a sealed envelope with your name written across the back flap of the envelope after it has been sealed. Recommendations not received in a sealed envelope with signature on the flap will not be accepted. Thank you in advance for your time.

Teacher's Name (Print) _____ Grade Level(s) _____

Subject(s) Taught: _____ School Site: _____

Please check as appropriate:

- Did the student meet assignment deadlines as required? _____ Yes _____ No
- Did the student come to class prepared? _____ Yes _____ No
- Did the student have attendance or tardiness issues? _____ Yes _____ No
- Is the student ready to concurrently perform well in high school AND college classes? _____ Yes _____ No
- Has the student demonstrated the ability to be:
 - Mature _____ Yes _____ No
 - Self-Motivated _____ Yes _____ No
 - Respectful _____ Yes _____ No
 - An independent learner _____ Yes _____ No

1. What qualities does the student have that make you feel like he/she would be successful at AMCS?

2. Describe the student's abilities in reading, writing, and/or mathematics.

3. Any other comments you would like to share that may help in our decision making process.

Based on your experience with the student, please select one of the following recommendations:

- () Highest Recommendation (I have no academic or behavior reservations about the student).
- () Recommendation (I am fairly confident the student will be successful).
- () Recommendation with Reservation (I have concerns that the student lacks the academic skills, behavior, attitude or other qualities necessary for success).
- () Do not Recommend (I do not believe the student is ready for this experience).

TEACHER SIGNATURE: _____ DATE: _____

Student's Last Name: _____ First Name _____

COUNSELOR RECOMMENDATION

Alaska Middle College School (AMCS) is an academic program intended to allow students to take college courses at the University of Alaska Anchorage. College-ready students are enrolled in college courses with adult college students in addition, high school classes are taught on campus. AMCS students must demonstrate the ability to make mature, independent, and responsible choices to succeed in college.

School Personnel: Please return your recommendation to the student, along with a transcript and a discipline report, in a sealed envelope with your name written across the back flap of the envelope after it has been sealed. Recommendations not received in a sealed envelope with signature on the flap will not be accepted. Thank you in advance for your time.

Counselor's Name (Print) _____ School _____

- Is the student self-motivated to attend AMCS and produce high quality work? _____ Yes _____ No
- Is the student ready to concurrently perform well in high school AND college classes? _____ Yes _____ No
- On a scale of 1 to 5, with 1 being never and 5 being always, please rate the following:

Student demonstrates ability to make mature choices

1 2 3 4 5

Student demonstrates ability to make independent choices

1 2 3 4 5

Student demonstrates ability to be self-motivated

1 2 3 4 5

Student demonstrates desire to make education a priority over social and recreational interests

1 2 3 4 5

Students who attend AMCS need to have demonstrated responsible and respectful behavior on a high school campus. Please **attach a discipline report** and provide additional details as appropriate.

Has the student previously been expelled and/or suspended from a district high school? _____ If yes, why and when?

Any other comments or you would like to share that may help in our decision making process.

Based on your experience with the student, select one of the following recommendations:

- () Highest Recommendation (I have no academic or behavior reservations about the student).
- () Recommendation (I am fairly confident the student will be successful).
- () Recommendation with Reservation (I have concerns that the student lacks the academic skills, behavior, attitude or other qualities necessary for success).
- () Do not Recommend (I do not believe the student is ready for this experience).

COUNSELOR SIGNATURE: _____ DATE: _____