

# Arts Teacher Recommendation

**Instructions to the applicant:** Please complete the information above the dotted line and give this form to a current arts teacher. Copies of this form can be made and given to other arts teachers if you feel additional references are necessary.

\_\_\_\_\_, a current student at \_\_\_\_\_,  
Student Name School Name  
is applying for acceptance to the RVHS School for the Arts in the area(s) of \_\_\_\_\_.

Arts Discipline(s) \_\_\_\_\_.

**Applicant's Waiver of Right of Access to Confidential Statement**

Under the Family Educational Rights and Privacy Act of 1974, a student has access to his or her educational records. We comply with this law, while still allowing the student the option of waiving the right of access. If you wish to waive the right to examine this recommendation, please sign. If left unsigned, you will have access to this document upon enrollment in the RVHS School for the Arts. The alternative you choose in no way affects our consideration of your application. I hereby freely and voluntarily waive my right to any information contained on this recommendation form submitted by:

Name of recommender (provided by applicant) \_\_\_\_\_

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**To the teacher:** Please provide your candid appraisal of the applicant named above and return this form to the Ridge View High School Guidance department in a sealed envelope. If you have additional comments, please feel free to use the back of this form.

If you have questions regarding this form, please contact Jennifer Bull, director, at [jbull@rvh.richland2.org](mailto:jbull@rvh.richland2.org) or 803/699.2999, ext.410

I have known the applicant for \_\_\_\_\_ years as his/her \_\_\_\_\_ teacher.

Please circle a number to rate the student in each category; 5 is highest and 1 is lowest. Add comments on the back of this form, as needed.

- |  |           |
|--|-----------|
| Quality of art work/performing skills    | 5 4 3 2 1 |
| Maturity level                           | 5 4 3 2 1 |
| Ability to work independently            | 5 4 3 2 1 |
| Ability to adapt to new situations       | 5 4 3 2 1 |
| Ability to organize                      | 5 4 3 2 1 |
| Ability to manage time effectively       | 5 4 3 2 1 |
| Ability to implement critique/suggestion | 5 4 3 2 1 |
| Overall tendency to excel                | 5 4 3 2 1 |

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

Print Name \_\_\_\_\_ School/Organization \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_