

**PRINCIPAL OR COUNSELOR RECOMMENDATION**

Please give this form to your current principal or counselor with a stamped envelope addressed to SMCHS

**Principal or Counselor:  
Please mail completed form to:**

Santa Margarita Catholic High School  
Admissions Office  
22062 Antonio Parkway  
Rancho Santa Margarita, CA 92688

**PLEASE PRINT**

Name of Applicant: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Date: \_\_\_\_\_

The above named student is applying for admission to Santa Margarita Catholic High School. This form is confidential and will be used only for the purpose of admission. You may indicate your rating by circling the appropriate box. If you wish to discuss this student personally rather than complete this form, please check here \_\_\_\_, sign the form and note your telephone number. The Director of Admissions will contact you. Thank you for helping us make a true assessment of this student. Please return this form as soon as possible.

ACADEMIC ABILITY	Exceptional Student	Fine Student Honor Roll	Average Student	Struggling Student	At Risk, poor grades
INTEGRITY	Exceptional Upright	Noticeable Upright	Upright, No concerns	Weak or questionable	Record of dishonesty
CONDUCT	Outstanding	Excellent	Good	Marginal	Poor
RECOMMENDATION AS A STUDENT	Outstanding	Excellent	Good	Fair	Poor
RECOMMENDATION AS A PERSON	Outstanding	Excellent	Good	Fair	Poor

We would appreciate receiving your answers to the following questions that relate to the applicant.

1. Has any serious disciplinary action ever been taken on this student? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain  
\_\_\_\_\_
2. Has this student had any attendance problems or issues? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain  
\_\_\_\_\_
3. Has the candidate any significant special needs, learning disabilities, or health problems?  
No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Additional comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Is there any additional information that might be better conveyed in a phone conversation?  
If yes, please provide phone number \_\_\_\_\_

Principal/Counselor Name \_\_\_\_\_ I have known the student for \_\_\_\_\_ years  
 Name of School \_\_\_\_\_ School Phone \_\_\_\_\_  
 School Address \_\_\_\_\_  
Street City State Zip  
 Principal/Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_