

Parent/Guardian's Signature:

3300 College Drive San Bruno, CA 94066 (650) 738-4013 • skylinemiddlecollege@smccd.edu skylinecollege.edu/middlecollege

Date:

PARENT/GUARDIAN RECOMMENDATION FORM Student's Name:					
					School:
	a parent/guardian, yo eing asked to share yo	u have spent more time with ur insights on this form.	n your child than schoo	ol staff. Therefore, you are	
Εv	aluate your child's pers	onal qualifications using the	following key:		
	1 = Outstanding	2 = Above Average	3 = Average	4 = Below Average	
	Maturity: Poise, et Personality: Cong Appearance: We Behavior: Well-ma Work habits: Indus	bility to get results, reliability, motional stability genial, considerate, likeable genial, considerate, likeable genial, comed and dressed, go annered, sincere, able to follostrious, self-reliant, sets prioritiositive thinking, open minderive, dynamic, self-confident	ood appearance ow rules ies, goes beyond what		
١.	What are some of the	outstanding accomplishme	ents of your child during	g the past three or four years?	
2.	In what areas have you witnessed the most development and growth in your child?				
3.	What are your child's outstanding personality traits?				
4	Have there been any experiences or person	personal circumstances whi	ch have affected you	r child's educational	