



## Teacher Letter of Recommendation

To the Applicant: Please have a teacher who knows you well complete this letter of recommendation. It is recommended that you get a letter of recommendation from a math, science, or technology teacher. After you enter your personal information onto this recommendation form, give this form to a teacher who complete it.

Applicant Name:

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

Home Address

\_\_\_\_\_

Street Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip Code

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To the Recommender:

The above-named person has requested that you supply a letter of recommendation in support of her/his application for consideration to the STEM Starter Academy at Springfield Technical Community College. Your feedback will provide valuable information in the evaluation of the applicant's potential for success in the program. Please provide additional information on separate official institutional letterhead.

Please give your completed recommendation to the applicant in a sealed envelope, with your signature signed across the seal of the envelope, in order for the student to send in all application materials together.

Admissions decisions are made only after all required application materials have been received and reviewed, including this Recommendation. Your prompt reply is kindly requested.

Thank you very much for your valuable assistance in this process.

Dr. Reena Randhir  
STEM Starter Academy  
Springfield Technical Community College  
One Armory Square, Suite 1  
P.O. Box 9000  
Springfield, MA 01102-9000  
Phone: 413-755-4821  
Fax: 413-755-4575  
Email: [rrandhir@stcc.edu](mailto:rrandhir@stcc.edu)



## Teacher Letter of Recommendation

### Part 1: Relationship Background

Name:		Position/Title:
School Name:		
Phone Number:	Email Address:	
I am a _____ math/science/technology teacher. _____ non-math/science/technology teacher.		
Subject(s) taught to applicant:		
Approximate length of time you have known applicant:		

Part 2: Applicant Characteristics. In comparison to other students you have known, please evaluate the applicant in each of the categories below by placing an X in the appropriate category:

Personal Qualities	Excellent	Good	Fair	Cannot Judge
Social/Emotional Maturity				
Honesty/Integrity				
Independence				
Self-Discipline				
Reaction to Criticism				
Acceptance of Feedback				
Motivation				
Respect for Authority				

Academic Abilities	Excellent	Good	Fair	Cannot Judge
Math Skills				
Science Skills				
Writing Skills				
Communication Skills				
Time-Management Skills				
Intellectual Curiosity				
Study Habits				
Ability to work in groups				
Other:				

<b>Overall recommendation:</b>
_____ <b>Highly recommend</b> _____ <b>Recommend</b> _____ <b>Recommend with reservation</b>

Comments (optional):  
Please attached additional letterhead, if needed.

\_\_\_\_\_  
Signature of Recommender

\_\_\_\_\_  
Date