



**Holy Martyrs Ferrahian High School**  
 Սրբոց Նահատակաց Ֆերահեան  
 Երկրորդական Վարժարան

**Holy Martyrs Marie Cabayan Elementary School**  
 Սրբոց Նահատակաց Մարի Գապայեան  
 Նախակրթարան

**RECOMMENDATION FORM**  
 (TO BE COMPLETED BY AN ADMINISTRATOR)

<b>To Be Completed by Parent/Guardian</b>			
Name of Student _____			
Last	First	Middle	
Date of Birth _____		Current Grade _____	
Parent/Guardian Name: _____			
Last	First	Middle	
Address: _____			
Number & Street	City	State/Zip Code	
Name of school currently attending: _____		Phone No. _____	

<b>To Be Completed by the School Administrator</b>	
How long have you known the applicant and in what capacity?	
What are the academic strengths and weaknesses of the applicant?	
How would you characterize the applicant's overall behavioral conduct at your school?	
Are the parents involved in their child's education? Yes _____ No _____ Somewhat _____	
Do the parents of this applicant fulfill their school's financial responsibilities? Yes _____ No _____	
Has the applicant ever been placed on probation or expelled from your school? Yes _____ No _____ <i>If yes, you may use the back of this form for additional comments.</i>	
_____ Name and title of person completing this form	_____ Telephone No.
_____ Signature	_____ Date