

# 2012 SUMMER PROGRAM TEACHER RECOMMENDATION FORM

## To the Applicant

If you are applying by Admission Portfolio, please complete the information in this section and give this form to two teachers (please duplicate this form for teacher #2) who are familiar with your work. Include information about Center for Talent Development and a copy of the course descriptions for the courses for which you are applying. **Choose teachers in the same discipline/subject area(s) as the courses for which you are applying.** Homeschoolers should choose non-family adults who are familiar with you in a learning context. Examples include a coach, music instructor, religious school teacher, mentor, co-op teacher, etc. Your teachers should place this form and their attached letter of recommendation in a sealed envelope with a signature over the flap and return it to you. You should include the sealed letters with your application. If this is not possible, you may have your teachers return the recommendations directly to us. As a courtesy, you might provide them with a stamped envelope addressed to the CTD Summer Program.

Applicant's Name

\_\_\_\_\_  
FIRST MIDDLE LAST

2011–2012 Grade Level \_\_\_\_\_ E-mail \_\_\_\_\_

Please select the program for which you are applying:  Leapfrog (PreK–grade 3)  Spark (grade 4)  Solstice (grades 4–6)  
 Apogee (grades 4–6)  Spectrum (grades 7 & 8)  Equinox (grades 9–12)  
 Civic Leadership Institute (CLI) (grades 9–12)

Please list the course(s) for which you have applied:

1st choice

COURSE TITLE

2nd choice

COURSE TITLE

3rd choice

COURSE TITLE

**Waiver:** I, \_\_\_\_\_, hereby waive my right of access to the completed recommendation.  
APPLICANT NAME

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF PARENT

DATE

## To the Teacher

The Center for Talent Development (CTD) at Northwestern University provides educational programs and services for academically talented students in PreK through grade 12. Leapfrog and Spark students take one-week enrichment courses that meet daily. Students in Solstice, Apogee, Spectrum, Equinox or CLI take an intense, academically challenging course that meets five hours per day, five days per week, for two or three weeks. We would appreciate your thoughtful reflection on whether this student would succeed in this program. We have asked the student to provide you with a copy of the course description(s) and admission requirements for the course(s) s/he is interested in for your information when completing this form. If you have further questions about the program, please contact us at 847/491-3782 extension 2 or 847/491-8257.

Teacher's Name

FIRST

LAST

Title/Department

School

Mailing Address

STREET

CITY

STATE

ZIP

Phone ( )

E-mail

How many years have you known the applicant? \_\_\_\_\_

**Please attach a letter that addresses the following:**

- Your relationship to this applicant including any relevant course work.
- The student's ability to succeed in the course(s) s/he selected.
- The student's maturity and ability to be self sufficient in residential/out-of-class social settings.
- What might the student contribute to a classroom of academically talented students?
- Any concerns you have about the student participating in a rigorous summer academic course.

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# 2012 SUMMER PROGRAM TEACHER RECOMMENDATION FORM continued

Please rate this student in the following categories by checking the box that best reflects his/her skill level. The CTD Summer Program is intended to provide academic courses that challenge students in their areas of strength.

Qualities	Not Applicable	Below Average	Average	Above Average	Exceptional
Intellectual curiosity					
Internal motivation					
Ability to manage stress					
Ability to learn independently					
Ability to initiate projects and assignments					
Academic integrity					
Academic achievement					
Academic potential					
Critical thinking skills					
Writing ability					
Verbal reasoning ability (for verbal course)					
Mathematical reasoning ability (for math course)					
Science reasoning ability (for science course)					

**Within the context of your school/organization,** how would you characterize the level at which the student is currently working in the subject area(s) of the courses to which s/he is applying?

- At grade level  
  One grade above  
  Two grades above  
  Don't know

Describe the cohort to which you are comparing/assessing this student: \_\_\_\_\_

Please rank the student's likelihood of succeeding in a fast-paced, accelerated summer course.

- Not likely  
  Somewhat likely  
  Likely  
  Very Likely

**Individually Paced (IP) math applicants only:** Students who have proven successful in IP math courses are those with exceptional ability in mathematics, who are independent learners and are capable of taking responsibility for their own learning, and who may have felt limited by traditional instructional methods. Please describe how you feel this student will perform in the individually paced environment.

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Thank you for agreeing to submit a recommendation for this applicant to the CTD Summer Program at Northwestern University. Please make a copy for your records, place this form and the letter of recommendation in a sealed envelope with your signature over the flap and return it to the student to include with his/her application. Alternatively, you may mail or fax the recommendation directly to:

Summer Program Admissions  
 Center for Talent Development  
 Northwestern University  
 617 Dartmouth Place  
 Evanston, IL 60208  
 Fax: 847/467-0880