



Village Parkway
Christian School
Touching lives for eternity

REQUEST FOR RECORDS

**Instructions to Parents:
Please complete this form and take
to the school your child is
transferring from.**

(Name of last school attended)

(Street Address)

(City/State/ZIP)

(Area Code and Telephone Number)

To Whom It May Concern:

_____ (student's name) is enrolling at Village Parkway Christian

School in the _____ grade.

He/She has attended your school. Please e-mail, mail, or fax a copy of his/her cumulative records, health records, transcripts, and any other appropriate school records (including medical, immunization, and psychological information).

Email: rbates@vpbc.net

Mailing address: 3002 Village Parkway, San Antonio, TX 78251 Attn: Registrar

Fax: 210-509-3502

Thank you for your attention to this matter.

Sincerely,

(Signature of Parent)

(Date)

Village Parkway Christian School

3002 Village Parkway
San Antonio, Texas 78251
Ph. 210.680.8187

Instructions to Parents:
Please complete items (1) and (2), then give to the school your child is transferring from.

Instructions to Principal:
Have child's teacher complete the Teacher Form and mail to Village Parkway Christian School.

Confidential Teacher Recommendation Form

(1) Name of applicant _____ Applying to grade _____

My son/daughter is applying for admission to Village Parkway Christian School. I would appreciate your completing this form and returning it directly to the Principal at VPCS. I hereby authorize the release of my child's records and evaluative data to Village Parkway Christian School.

(2) Date _____ Signature of Parent/Guardian _____

Name of Teacher _____ Name of School _____

Subject area or grade taught _____ Teacher Signature _____

In what capacity and for how long have you known the applicant? _____

Your candid estimate of the applicant will assist our admissions process immensely. Your comments will be held in strictest confidence. Please indicate your ratings by number in the right-hand columns. Use a question mark where you have insufficient evidence.

	1	2	3	4	5	Rating
Academic Ability	Exceptional	Above average	Average	Lower marginal ability	Poor academic risk	
Initiative, Drive	Outstanding, resourceful	Well above average	Generally strong enough	Occasionally weak or lacking	Very weak	
Leadership and Responsibility	Outstanding, Top Positions	Commendable, top or next to top positions	Capable, minor positions	No sign of leadership or involvement	Record of irresponsibility	
Interest in non-academic activities	Outstanding	Commendable, top or next to top positions	Active	Minor	No participation	
Parental Support	Exceptional	Quite good	Average	Sometimes unsupportive	Often not supportive, can be critical	
Peer Relationships	Highly respected, well liked	Respected, liked	Accepted but not sought out	Some difficulty in cultivating	Unhealthy, unskilled in relationships	
Personal Qualities	Superior personal qualities	Great strengths in personal qualities	Strengths outweigh weaknesses	Somewhat immature for age	Very immature for age	
Emotional Stability	Extremely well balanced	Well balanced	Usually no problems	Some problems	Many problems	
Summary as a student	Outstanding	Above average	Average	Below average	Poor	
Summary as a person	Outstanding	Above average	Average	Below average	Poor	

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Instructions to Parents:
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Confidential Principal Recommendation Form

(1) Name of student: _____ **Applying to grade** _____

My son/daughter is applying for admission to Village Parkway Christian School. I would appreciate your completing this form and returning it directly to the Principal at VPCS. I hereby authorize the release of my child's records and evaluative data to Village Parkway Christian School.

(2) Date _____ **Signature of Parent/Guardian** _____

For School Principal to complete:

Name of School _____

Phone Number _____ Name of Principal _____

Length of time acquainted with student _____

Do you section students according to ability? _____ If yes, in what subject(s) is the student in the most advanced sections? _____

Does the student have any significant limitations (physical, social, emotional)? _____

Is the student's record with you a true index of ability, or have outside circumstances interfered with academic achievement? (For example, illness, excessive involvement in extracurricular activities, difficult home situation, etc.) If not a true index, please explain:

This student has been sent to my office for disciplinary problems: _____ often _____ seldom _____ never

This student has been suspended _____ times.

Has the student been expelled and is therefore not eligible to return next year? _____ yes _____ no

Your candid estimate of the applicant will assist our admissions process immensely. Your comments will be held in strictest confidence. Please indicate your ratings by number in the right-hand columns. Use a question mark where you have insufficient evidence.

	1	2	3	4	5	Rating
Integrity	Exceptionally upright	Noticeably upright	Upright no cause to question	Weak or questionable	Record of dishonesty	
Conduct	Outstanding in every respect	Generally excellent	Good or acceptable	Marginal	Poor or intolerable	
Leadership and Responsibility	Outstanding, Top Positions	Commendable next to top positions	Capable, minor positions	No sign of leadership	Record of irresponsibility	
Interest in non-academic activities	Outstanding	Commendable next to top positions	Active	Minor	No participation	
Parental Support	Exceptional	Quite good	Average	Sometimes unresponsive	Unsupportive, often critical	
Respect for Authority	Works very well with authority	Works well with authority	Mild resistance to authority	Periodic rebelliousness	Rebellious to authority	
Summary	Outstanding	Above average	Average	Below average	Poor	

Outstanding talents/accomplishments or reservations not covered by the above categories: _____
