



I POLY HIGH SCHOOL
APPLICATION FOR ADMISSION (2023-24 School Year)
Form 4b: OTHER ACADEMIC Teacher Recommendation

APPLICANT: Please enter your name and current grade level, then send this form to a current or former **ACADEMIC** teacher.

Student name _____ Current grade level _____

Parent Name: _____ Primary Phone Number: _____

TEACHER: The above-named student is applying to International Polytechnic High School. IPoly is a public, college preparatory high school with a unique and challenging project-based learning curriculum. Your careful evaluation of this student will greatly assist us in our admission process. Your response will be kept confidential, and once received, students have no access to admission records. Please contact IPoly's Student Admissions Coordinator at 909-839-2331 if you have any questions or concerns.

We sincerely appreciate your time and effort in completing this evaluation. Applications will not be reviewed without teacher responses.

Teacher's name _____ School name _____

Grade level(s) taught applicant: _____

Please compare this applicant to other students you have taught:

| | No basis for Judgment | Below Average | Average | Above Average | Outstanding |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ability to Work as part of a Team | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Course/Subject Aptitude | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maturity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motivation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please comment on student's strengths and challenges:

Once again, thank you for taking the time to complete this form. Your forthright assessment will help us as we evaluate this student's potential for success at IPoly High School.

 Teacher Signature (electronic signature acceptable)

 Date

These documents and forms are required for the application to be considered complete. Feel free to call 909-839-2331 if you have any questions. Please submit the requested documents directly to IPoly.

Mail to: International Polytechnic High School
 Attn: Admissions Department
 3851 W. Temple Avenue
 Pomona, CA 91768

Or email to: application@ipolyhighschool.org
 (include applicant's name in subject line)