RECOMMENDATION FORM

CHELSEA SCHOOL
2970 Belcrest Center Drive  Suite 300  Hyattsville, MD 20782
Website: www.chelseaschool.edu  Email: information@chelseaschool.edu
Tel: (240) 467-2100  Fax: (240) 467-2120

Name of current school

Address of current school

May we contact you for further information?
☐ Yes  ☐ No

Telephone Number where you can be reached

1. Please describe the academic strengths of the student:

2. Please describe the areas of academic needs for the student:

3. Please describe the type of educational program in your classroom (class size, academic level, amount of special education instruction).

4. How does this student interact with other students?

5. Are there any behavioral problems noted in the classroom?

6. Is there any other relevant information that you think would be helpful to us in determining the best academic setting for this student?

Teacher's signature:

________________________

Please print name:

________________________

Date: ____________________