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RECOMMENDATION FORM-Mathematics Instructor

APPLICANT TO COMPLETE THIS SECTION:

Applicant's Name: _____

OPTIONAL WAIVER OF RIGHT OF ACCESS

We, the undersigned, understand that the information provided in this letter of recommendation will be used by MSSM in deciding admission. We hereby waive any and all rights of access to this letter we might have under the Family Educational Rights and Privacy Act of 1974, or other related laws, regulations, or policies.

Applicant Signature

Date

Parent/Legal Guardian Signature

Date

The above-named applicant has applied for admission to the Maine School of Science and Mathematics. We would like you to know that your input is an important element of the application process and ask that you be detailed and candid in your comments. Your time and effort is greatly appreciated. We ask that you return this form directly to the Admission Office.

On separate paper, please respond to the following:

- A) Describe a memorable moment in your classroom which demonstrated this applicant's knowledge, understanding and/or proficiency in mathematics.
- B) Have you noticed any demonstration of the applicant working or sharing mathematical ideas/concepts with other students?
- C) Has this applicant participated in any extra-curricular activities related to mathematics (e.g. Math Counts, math team, math camps)?
- D) In your opinion, does this applicant possess the skills necessary for success at the Maine School of Science and Mathematics?

Name (please print): _____ Current Course Name: _____

Signature: _____ Date: _____ Email: _____

Address: _____ Phone Number: _____

How long have you known the applicant? _____

The student has completed and/or is taking the following mathematics course(s): Algebra I Algebra II Geometry
 Other _____