



**Franklin**  
ACADEMY

## Request for Teacher Input

*The student named below is applying for admission to Franklin Academy and we would appreciate input from current teachers. Please complete the form and return it to Franklin Academy via email at [admissions@franklinmn.org](mailto:admissions@franklinmn.org), or via mail at 1001 Boone Ave. N, Minneapolis, MN 55427. Thank you!*

Student Name: \_\_\_\_\_ School/Clinic: \_\_\_\_\_

Professional's Name: \_\_\_\_\_ Subject Area: \_\_\_\_\_

***Please offer as much specific information regarding the student's strengths and weaknesses in the following areas.***

### **Academic Skills:**

Approx. Grade Level Equivalent Reading Level:

Approx. Grade Level Equivalent Math Level:

### **Work Habits:**

**Communication Skills:**

**Emotional Adaptability:**

**Behavior Skills:**

**Additional Information you would like to share:**

Have the student's parents been responsive to your efforts to help this student?    Yes            No  
If no, please explain.

Professional's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you so much for your time!

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Attn: Admissions, 1001 Boone Ave. N, Minneapolis, MN 55427.