

CONFIDENTIAL COACH RECOMMENDATION

Name of Applicant _____ Present Grade _____

I acknowledge that I waive my right to read the confidential Coach recommendation for the student listed above.

Name of parent or guardian

Signature of parent or guardian

Carrabassett Valley Academy is a college preparatory ski/snowboard academy for student/athletes who are serious about developing themselves to their full potential. The Admissions Committee bases its decision upon the complete transcript, teacher and coach recommendations, student and parent essays and personal interviews. Your candid assessment of the applicant will be extremely important to the committee.

How long have you known the applicant? _____

In what level program has the applicant been enrolled? _____

A. Please make checks in the boxes and make comments on any characteristic you feel needs further explanation.

CHARACTERISTIC	Age approp Y/N	Superior	Good	Fair	Poor
Capacity for learning					
Athletic potential					
Attitude toward learning					
Work ethic					
Responsibility for actions					
Respect for adults and peers					
Leadership potential					
Personal integrity/Honesty					
Concern for others					
Coachability					
Physical stamina					
Sense of humor					
Self-confidence					
Takes athletic training seriously					

B. What words first come to mind to describe the applicant? _____

C. What is the applicant's greatest strength? _____

D. What is the applicant's greatest need? _____

E. Has the applicant ever been in any disciplinary difficulty that you are aware of? Please relate the incident(s) and any disciplinary action that resulted.

F. Are there any observed problematic social behaviors or discipline problems that have not resulted in disciplinary action, but are of concern? Yes ___ No ___. If yes, please explain _____

G. All students enrolled in CVA participate in a rigorous athletic program that specifically includes skiing and snowboarding. In your opinion is the applicant fully capable of participating in this program? Please make any comments you wish to add.

H. Please describe the school and family partnership, including any comments on parent cooperation and support of the child's experience _____

I. Overall evaluation of the applicant as a person:

J. I recommend the applicant for admission to Carrabassett Valley Academy:

___ Enthusiastically ___ Confidently ___ With Reservations ___ Do Not Recommend

Signature _____ Date _____

Please Print Name _____

Athletic Program _____ Telephone _____

Address _____

City _____ State _____ Zip _____

Return to: Admissions
Carrabassett Valley Academy
3197 Carrabassett Dr.

Carrabassett Valley, ME 04947 or dsmith@gocva.com, fax: 207-237-2213