

**Holy Trinity Catholic Secondary School  
Teacher Recommendation Form  
2017-2018**



**For Grade 8 Students from Non-Feeder Schools**

Student: \_\_\_\_\_

Parent/Student email: \_\_\_\_\_

Elementary School: \_\_\_\_\_

Grade 8 Teacher: \_\_\_\_\_

Please have your grade 8 teacher complete the recommendation portion of this form. Return this completed and signed form with the other required registration documents to the Holy Trinity Guidance Department.

**Grade 8 Teacher Recommendation:** Please circle the course you recommend this student take for each subject area on the chart below and estimate their current achievement in each subject area.

Subject	Academic	Applied	Locally Developed	Current %
English	ENG1D	ENG1P	ENG1L	_____
Mathematics	MPM1D	MFM1P	MAT1L	_____
Science	SNC1D	SNC1P	SNC1L	_____
Geography	CGC1D	CGC1P	CHC2L (History)	_____
French	FSF1D	FSF1P	GLE1O (Learning Strategies – IEP students only)	_____

**Grade 8 Teacher Comments:**

\_\_\_\_\_  
Grade 8 Teacher Signature    Date

\_\_\_\_\_