INSTRUCTIONS TO PARENTS:
Dear Parent, this optional form may be filed to supplement your child’s application. Complete the information requested in the spaces below and give this form to your child’s arts instructor after December 1. This form is confidential and must be sent by the arts instructor to Viewpoint School.

Please read the following statement and sign this form. I acknowledge that I waive my right to read this confidential recommendation.

<table>
<thead>
<tr>
<th>Parent/Guardian Name</th>
<th>Parent/Guardian Signature</th>
<th>Date</th>
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<tbody>
<tr>
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<tr>
<td>Applicant’s Name</td>
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<tr>
<td>Name of Arts Instructor</td>
<td></td>
<td>Title</td>
</tr>
<tr>
<td>School or Organization Name, Address</td>
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INSTRUCTIONS TO PERFORMING OR VISUAL ARTS INSTRUCTORS:
Viewpoint School is a coeducational, college preparatory day school for students in Kindergarten through Grade Twelve. The School provides an academically enriched, nurturing environment, and promotes the intellectual, emotional, physical, and social growth of children. The Admission Committee seeks to enroll students who will find success in the academic program, who will participate in the School’s community, who possess a high level of motivation, who are of good character, and who demonstrate positive behavior. Your completion of both sides of this evaluation is extremely helpful. It is important to all of us that this child’s next school placement be an appropriate one for both the student and the family. Your observations of this child are important to us. Please know that the professional comments you share are held in STRICTEST CONFIDENCE, and do not become a part of a student’s permanent record. We thank you in advance for the help your comments will provide.

Please tell us a bit about yourself and your background, as well as how long and in what capacity you have worked with the applicant.

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In the space below, please provide a brief statement about this student’s participation in the arts. Please list any notable achievements in music, drama, fine arts, film, dance, photography, etc. If you need additional space, please attach a separate letter.

___________________________________________________________________________
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APPLICANT’S NAME: _________________________________

I would evaluate this candidate as follows:

<table>
<thead>
<tr>
<th>+ Artistic Potential</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Outstanding</th>
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<tbody>
<tr>
<td>+ Artistic Ability</td>
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<tr>
<td>+ Attitude</td>
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<tr>
<td>+ Commitment</td>
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<td>+ Motivation</td>
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<td>+ Ability to take direction</td>
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<td>+ Teamwork</td>
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<tr>
<td>+ Creativity</td>
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Additional Comments: __________________________________________________________________________________________
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☐ Check here if you would like us to call you for further information about this applicant.

Best time to reach you: ________________________________ Phone: ________________________________

Please print your name and title: ________________________________ Signature: ________________________________ Date: ________________________________

Your E-mail address: ________________________________

Please return this form no later than January 17, 2020 directly to:
Viewpoint School Office of Admission
Attn: Admission Coordinator
23620 Mulholland Highway • Calabasas, CA 91302-2097
818-591-6560 • Fax 818-591-0834 • email: patrick.labo@viewpoint.org

Optional Performing or Visual Arts Recommendation Form