



# Broad Branch Children's House

## **BBCH Recommendation Form**

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

**To the parent:** Print the above information and give this form to the child's preschool teachers with a stamped envelope addressed to:

**Broad Branch Children's House  
Attn: Joseph Henry  
5608 Broad Branch Road NW  
Washington, DC 20008**

**To the preschool teachers:** It is only necessary to complete this **form** once for any child applying to one or more of the above schools. Please complete an original for each child by writing comments in each section. This will remain confidential and will not become part of the student's permanent academic record. We sincerely appreciate your cooperation and candor as you provide us with the necessary information to make informed admissions decisions for young children.

### **PHYSICAL DEVELOPMENT —**

**Describe this child's:**

1. Large and small motor skills and choice of activities.
2. Ability to care for him/herself.

## **SOCIAL EMOTIONAL DEVELOPMENT —**

### **Describe this child's:**

1. Ability to work and play cooperatively
2. Relationships with peers and adults
3. Ability to resolve conflicts

## **LEARNING DEVELOPMENT —**

### **Describe this child's ability to:**

1. Try new activities
2. Work independently
3. Make transitions between activities
4. Focus on a task

## **LANGUAGE DEVELOPMENT —**

### **Describe this child's:**

1. Ability to be understood
2. Use of language to express ideas, needs, and feelings

## **GENERAL OBSERVATIONS**

1. Describe the most important accomplishment this child has made in your classroom.
2. Describe the areas most needing support or adult intervention.
3. Describe the family's contributions to the school community.

Teacher's Name (please print): \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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