



ROUND ROCK CHRISTIAN ACADEMY
Elementary Teacher / Principal Recommendation Form

This student is applying for admission to RRCA. Please complete this form and return it directly to the Admissions Office at RRCA as soon as possible. Please mail, fax, or scan and email the completed form to:

Round Rock Christian Academy
Attn: Student Registrar
800 Westwood Drive
Round Rock, TX 78681

Phone: 512-255-4491
Fax: 512-255-6043
admissions@rrca-tx.org

Name of Teacher / Principal _____ **Name of School** _____

Subject / Grade level _____ **Email address** _____

Student's Name _____ **How long have you known student?** _____

Has the applicant been assigned to TAG/Gifted classes? ☐ Yes ☐ No

Has the applicant been assigned to remedial classes or been given modified assignments? ☐ Yes ☐ No

Describe the student's academic growth this year:

Describe student's social strengths:

Has the student ever had any behavioral or conduct concerns? ☐ Yes ☐ No

If yes, please explain:

Are the parents supportive of the student's education in the home and school settings?

Are there any areas of concern for this student? ☐ Yes ☐ No

If yes, please explain:

Additional Comments: