



55 Audubon Street • New Haven, CT 06510
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**School Counselor
 Recommendation**

Deadline: February 1st

This student is applying to the ACES Educational Center for the Arts program. Please submit the following recommendation by the deadline in order for the applicant to be considered for admission.

Student Last Name _____ MI _____ First Name _____
 School Name _____ Town _____
 Counselor Name _____ Phone Number _____

How would you evaluate this student?

	Fair	Good	Very Good	Comments
Attendance				
Punctuality				
Concentration				
Completion of assignments				
Class participation				
Respect for others				
Ability to follow directions				
Ability to work independently				
Ability to make decisions				
Ability to work as a group member				

For Data Collection Purposes ONLY: To be completed by Sending School Personnel

Special Education, 504, and Support Services

Does the student receive any special education services? Yes No

If yes, date of last triennial evaluation _____

If yes, please describe _____

Has the student been identified as 504 eligible and receive services? Yes No

If yes, please describe _____

Does the student receive any support services other than special education? Yes No

If yes, please describe _____

ELL (English Language Learner) Support Services

Does the student receive bilingual services? Yes No If yes, date bilingual services began _____

Does the student receive ELL services? Yes No If yes, date ELL program services began _____

Counselor Signature _____

Date _____

Educational Center for the Arts (ECA) is a program of Area Cooperative Educational Services (ACES). Area Cooperative Educational Services does not discriminate on the basis of race, color, religion, sex, age, marital status, national origin, handicap or sexual orientation.