

POSTON TWO SCHOOL
Elementary Division

Summary of Recommendations
for Pupils of Grade _____ Room _____

Teacher: _____

Date: _____

Pupil Names (Alphabetically, Last names first)	Sex		Recommended to Grade		Comments
	M	F	Yes	No	
1. _____					
2. _____					
3. _____					
4. _____					
5. _____					
6. _____					
7. _____					
8. _____					
9. _____					
10. _____					
11. _____					
12. _____					
13. _____					
14. _____					
15. _____					
16. _____					
17. _____					
18. _____					
19. _____					
20. _____					

Instructions: This summary must agree with the Teacher's Recommendation for Acceleration/Retention and with the report to parents. Hand this report to the principal on or before June 5, 1944.