



**RECLAIM
EDUCATION**

LEGACY LAB
A FAMILY LEARNING & WELLNESS EXPERIENCE



LEGACY LAB TEACHER RECOMMENDATION

Teacher Introduction & Selection Guide

Thank you for helping us identify students who may benefit from Legacy Lab. Legacy Lab is a family learning and wellness experience that gives students opportunities to strengthen confidence, communication, creativity, leadership, goal-setting, and real-world readiness through engaging experiences, projects, and meaningful checkpoints.

Who should you recommend?

Recommend students who would benefit from an opportunity to grow, contribute, explore their strengths, and build skills in a supportive environment. Selection is based on potential and program fit - not grades alone.

- Shows potential, curiosity, creativity, initiative, or an interest in learning and growing.
- Would benefit from confidence-building, leadership development, mentorship, or positive peer connection.
- Shows a willingness - or emerging willingness - to participate, communicate, collaborate, and try new things.
- Could benefit from structured opportunities to set goals, complete projects/checkpoints, and celebrate progress.
- Can participate in a group setting with support and clear expectations.
- Has strengths or potential that may not be fully reflected by grades alone.

NO GPA REQUIREMENT | Please recommend based on potential, readiness for growth, and program fit.

What we are asking from you

Complete one recommendation form for each student you believe would be a good fit. Focus on the student's strengths, potential, interests, areas of growth, and why Legacy Lab could be valuable for them.

Return the completed form according to the submission instructions provided by Reclaim Education or your school contact.



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LEGACY LAB RECOMMENDATION FORM

Date: _____

I, _____, recommend _____ for the Legacy
Teacher Name *Student Name*
Lab program.

Teacher Information

School / Grade or Subject: _____

Email: _____

Why are you recommending this student?

Briefly describe the strengths, potential, interests, or areas of growth that make this student a good candidate.

Student Strengths / Areas of Potential

- | | |
|---|--|
| ☐ Leadership potential | ☐ Creativity / innovation |
| ☐ Communication | ☐ Collaboration / teamwork |
| ☐ Curiosity / willingness to learn | ☐ Goal-setting / motivation |
| ☐ Confidence-building opportunity | ☐ Would benefit from mentorship / positive connection |

Other: _____

Additional Comments

Teacher Signature: _____ Date: _____

No GPA requirement. Recommendations should reflect student potential, readiness for growth, and program fit.