

Teacher Evaluation

Deadline: January 21, 2011

Pre-k, Kindergarten and 1st Grade Only

Part E

Applicant's Full Name: _____

Applicant's Current School: _____ Current Grade: _____

Applicant Family:

Please submit this form to your current teacher, allowing time for completion and return by January 21, 2011.

I waive my right of access and that of my child to this teacher evaluation form. _____
Parent's Signature

Current Teacher:

The student above is applying for admission to one or more schools. As part of the admission process, please assess the student as compared with his or her peers. We appreciate your time and effort in completing this evaluation. Be assured that all of the information you provide will be held in strict confidence.

Please keep the original and send copy(ies) to the school(s) to which the student is applying. Please mail this form directly to the admission office at Parish Episcopal School, 14115 Hillcrest Road, Dallas, TX 75254.

	Below Expectations 1	2	3	4	Exceptional 5	No Basis
Social/Emotional Development						
Attention span						
Ability to follow directions						
Ability to complete tasks						
Ability to work in groups						
Attitude towards teachers						
Attitude towards peers						
Attitude of peers towards child						
Accepts consequences of own behavior						
Child's initial adjustment						
Emotional maturity						
Reaction to setbacks						
Response to teacher direction						
Leadership						
Self-discipline						
Qualities of mind (keenness, imagination, curiosity)						
Parental expectations, support, attitude towards child						
Parental expectations, support, attitude towards school						
School Performance						
Language ability						
Fluency in English						
Vocabulary						
Writing skills						
Reading skills						
Oral communication skills						
Mathematical concepts						
Is English his/her primary language?	YES	NO				
Aesthetic Development – shows interest as follows:						
Art						
Music						
Dramatic play						
Study Habits						
Ability to work independently						
Ability to work with others						
Pattern of completing work on time						
Organization/care of materials						
Prediction of success at next grade level						
Health and Attendance Record						
General health						
Attendance						
Tardiness						

(over)

Teacher Evaluation *continued*

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Please comment on the following: *Attach a separate sheet, if necessary.*

1. Applicant's social and/or emotional development as compared with others of the same chronological age:

2. Special needs to address may include:

3. Applicant's strengths:

4. Applicant's weaknesses:

5. Has outside help, enrichment, tutoring or testing been recommended? yes no
If yes, please elaborate.

6. Please include other pertinent information. *Attach a separate sheet, if necessary.:*

This student has been enrolled in this school for _____ year(s). I have known him/her for _____ year(s).

Please PRINT the Following:

Name

Position

Date

School

Address

Telephone

City

State

Zip Code

E-Mail Address