



SACRED HEART SCHOOL
Confidential Teacher Evaluation Form
Grades 1 - 8

General Instructions

We recommend that you download and complete this form using Acrobat Reader - <https://get.adobe.com/reader/>

Chrome and other browsers don't support saving PDF forms. Your responses will not be saved.

TO THE PARENT(S):

Applicant's Name:

Applying to Grade:

Instructions: As part of the admissions process at Sacred Heart School we must receive a candid assessment of the applicant. The student's application will not be processed without this completed form. Please email a copy of this form to your student's teacher and ask him/her to complete it and email it directly to Sacred Heart's Admissions Director Laura Leach at lleach@sacredheart.org.

TO THE TEACHER:

Thank you for completing this form for your student applying to our school. It is an essential part of our admissions consideration and we greatly appreciate your time!

To maintain confidentiality and authenticity of this evaluation, please do not return the completed form to your student's parent, but email it directly to Sacred Heart's Admissions Director Laura Leach at lleach@sacredheart.org.

Based on your experience with this child, please check the most appropriate response.

ACADEMIC ABILITY		Comments
Performs as well as ability allows	<input type="checkbox"/>	
Does well but below capacity	<input type="checkbox"/>	
Performance well below capacity	<input type="checkbox"/>	
Academic Concerns	<input type="checkbox"/>	

CONTRIBUTION TO CLASS		Comments
Makes contributions in practically all subjects	<input type="checkbox"/>	
Frequently makes contributions	<input type="checkbox"/>	
Sometimes makes contributions	<input type="checkbox"/>	
Does not often make contributions	<input type="checkbox"/>	

Applicant Name:

LEADERSHIP		Comments
Generally accepted as leader of group activity		
Can be leader—does not seek to lead group		
Seldom reveals ability to direct others		
Rarely attempts the role of leader		

PERSISTANCE		Comments
Works at task until finished, does not matter how difficult. Willing to ask for help.		
Usually persistent, sometimes needs encouragement		
Often becomes discouraged and disinterested		
Noted for not finishing work		

BEHAVIOR		Comments
Rarely requires reminders		
Sometimes acts up, but not a consistent problem		
Often disrupts class		
Frequent discipline issues		

Please rate this student from 1 (low) to 5 (high) in each of the categories listed. Circle the appropriate number.

CHARACTER	1	2	3	4	5	Comments
Integrity						
Concern for others						
Initiative						
Motivation						
Responsible						

WORK HABITS	1	2	3	4	5	Comments
Attention span						
Follows oral directions						
Does work neatly						
Creativity						
Self-Disciplined						

PEER RELATIONS	1	2	3	4	5	Comments
Cooperation						
Makes friends easily						
Willingness to play with others						
Sharing						
Self-control						

Applicant Name:

Are you aware of any special education services this student has had (e.g. remedial reading, learning disabilities program, English Language Learning class, enrichment classes?) Are you aware of any special educational services this student may need? If yes, which one(s)?

To your knowledge, are the parent's perceptions of the applicant compatible with your schools understanding of the applicant?

Please comment on the degree and type of parent involvement:

Thank you for taking the time to complete this form.

May we contact you if we need additional clarification? Yes No

Person Completing Form:		
Grade Level:	Subject:	
School:		
Mailing Address:		
City:	State:	Zip:
Your phone number:		or Email: