

Applying to Grade 6

teacher evaluation: homeroom

Due by _____

Applicant's Name (Please print) _____ Applying to Grade _____

INSTRUCTIONS Please give this form with a stamped envelope to the appropriate teacher at your current school, after January 1. Make sure the teacher is aware of the application deadline.

TO THE TEACHER

Person Completing Form _____

Subject/Grade Level Taught _____ School _____

Mailing Address _____

Phone _____

Dear Teachers,

Recognizing that completing this form is not part of your official duties, the school greatly appreciates your helping the applicant by supplying the information requested. Please return the evaluation form in the envelope provided to Community School at the address below. *The information submitted will be considered confidential and will not become part of the student's school records. Your candor will benefit the applicant and the school.* Thank you!

How long have you worked with the applicant? _____

How well do you know the student academically? Very Well Well Not Well Personally? Very Well Well Not Well

What are the first few words that come to mind to describe the applicant? _____

ACADEMIC QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Study Habits					
	Academic Skills					
	Motivation					
	Intellectual Curiosity					
	Works Independently					
	Creative Problem-Solving					
	Critical/Abstract Thinking					
	Works Cooperatively					
	Communicates & Organizes Ideas					
	Intellectual Risk Taker					



PERSONAL QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Leadership					
	Peer Relations					
	Sense of Humor					
	Reaction to Criticism					
	Concern for Others					
	Self-Confidence					
	Integrity					
	Willingness to take risks					
	Responsibility for Own Actions					
	Involvement Beyond Classroom					
	Parent Involvement & Cooperation					

ADDITIONAL INFORMATION

Please comment on the applicant's strengths as a student. _____

Please comment on the applicant's areas for growth as a student. _____

Please describe the relationship between the student's level of effort and his/her academic achievement. _____

Please mention any additional information you think might help the school make an informed decision. _____

If the school needs clarification, may we contact you by phone? Yes No Phone _____

In addition, may we contact you by email? Yes No Email _____

Signature _____ **Date** _____

Applying to Grades 7-12

teacher evaluation: english or social studies

Due by _____

Applicant's Name (Please print) _____ Applying to Grade _____

INSTRUCTIONS Please give this form with a stamped envelope to the appropriate teacher at your current school, after January 1. Make sure the teacher is aware of the application deadline.

TO THE TEACHER

Person Completing Form _____

Subject/Grade Level Taught _____ School _____

Mailing Address _____

Phone _____

Dear Teachers,

Recognizing that completing this form is not part of your official duties, the school greatly appreciates your helping the applicant by supplying the information requested. Please return the evaluation form in the envelope provided to Community School at the address printed below. *The information submitted will be considered confidential and will not become part of the student's school records. Your candor will benefit the applicant and the school.* Thank you!

How long have you worked with the applicant? _____

How well do you know the student academically? Very Well Well Not Well Personally? Very Well Well Not Well

What are the first few words that come to mind to describe the applicant? _____

ACADEMIC QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Study Habits					
	Academic Skills					
	Motivation					
	Intellectual Curiosity					
	Works Independently					
	Creative Problem-Solving					
	Critical/Abstract Thinking					
	Works Cooperatively					
	Communicates & Organizes Ideas					
	Intellectual Risk Taker					



PERSONAL QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Leadership					
	Peer Relations					
	Sense of Humor					
	Reaction to Criticism					
	Concern for Others					
	Self-Confidence					
	Integrity					
	Willingness to take risks					
	Responsibility for Own Actions					
	Involvement Beyond Classroom					
	Parent Involvement & Cooperation					

ADDITIONAL INFORMATION

Please comment on the applicant's strengths as a student. _____

Please comment on the applicant's areas for growth as a student. _____

Please describe the relationship between the student's level of effort and his/her academic achievement. _____

Please mention any additional information you think might help the school make an informed decision. _____

If the school needs clarification, may we contact you by phone? Yes No Phone _____

In addition, may we contact you by email? Yes No Email _____

Signature _____ **Date** _____

Applying to Grades 7-12

teacher evaluation: math or science

Due by _____

Applicant's Name (Please print) _____ Applying to Grade _____

INSTRUCTIONS Please give this form with a stamped envelope to the appropriate teacher at your current school, after January 1. Make sure the teacher is aware of the application deadline.

TO THE TEACHER

Person Completing Form _____

Subject/Grade Level Taught _____ School _____

Mailing Address _____

Phone _____

Dear teachers,

Recognizing that completing this form is not part of your official duties, the school greatly appreciates your helping the applicant by supplying the information requested. Please return the evaluation form in the envelope provided to Community School at the address printed below. *The information submitted will be considered confidential and will not become part of the student's school records. Your candor will benefit the applicant and the school.* Thank you!

How long have you worked with the applicant? _____

How well do you know the student academically? Very Well Well Not Well Personally? Very Well Well Not Well

What are the first few words that come to mind to describe the applicant? _____

ACADEMIC QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Study Habits					
	Academic Skills					
	Motivation					
	Intellectual Curiosity					
	Works Independently					
	Creative Problem-Solving					
	Critical/Abstract Thinking					
	Works Cooperatively					
	Communicates & Organizes Ideas					
	Intellectual Risk Taker					



PERSONAL QUALITIES

Compared to other students you have taught at this grade level, how would you rate this student in terms of:

NO BASIS		EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	COMMENTS
	Leadership					
	Peer Relations					
	Sense of Humor					
	Reaction to Criticism					
	Concern for Others					
	Self-Confidence					
	Integrity					
	Willingness to take risks					
	Responsibility for Own Actions					
	Involvement Beyond Classroom					
	Parent Involvement & Cooperation					

ADDITIONAL INFORMATION

Please comment on the applicant's strengths as a student. _____

Please comment on the applicant's areas for growth as a student. _____

Please describe the relationship between the student's level of effort and his/her academic achievement. _____

Please mention any additional information you think might help the school make an informed decision. _____

If the school needs clarification, may we contact you by phone? Yes No Phone _____

In addition, may we contact you by email? Yes No Email _____

Signature _____ **Date** _____