

# Applying to Grades 1-5 teacher evaluation

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? \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

## ACADEMIC DEVELOPMENT: Language Arts

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

|                        | EXCELLENT | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | COMMENTS |
|------------------------|-----------|---------------|---------|---------------|----------|
| Reading level          |           |               |         |               |          |
| Written language level |           |               |         |               |          |
| Spelling level         |           |               |         |               |          |
| Oral language          |           |               |         |               |          |

## ACADEMIC DEVELOPMENT: Math

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

|                       | EXCELLENT | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | COMMENTS |
|-----------------------|-----------|---------------|---------|---------------|----------|
| Computation           |           |               |         |               |          |
| Problem-solving       |           |               |         |               |          |
| Mathematical Thinking |           |               |         |               |          |



## SOCIAL AND EMOTIONAL DEVELOPMENT

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

|   | ALWAYS | USUALLY | SELDOM | NEVER | COMMENTS |
|---|--------|---------|--------|-------|----------|
| Is self-confident                                 |        |         |        |       |          |
| Has a positive attitude                           |        |         |        |       |          |
| Is open to suggestions/Seeks help                 |        |         |        |       |          |
| Takes initiative                                  |        |         |        |       |          |
| Meets challenges                                  |        |         |        |       |          |
| Demonstrates responsibility                       |        |         |        |       |          |
| Interacts positively & constructively with others |        |         |        |       |          |
| Respects property of others                       |        |         |        |       |          |
| Follows directions                                |        |         |        |       |          |
| Consistently does homework                        |        |         |        |       |          |
| Is attentive                                      |        |         |        |       |          |
| Is a discipline problem in classroom              |        |         |        |       |          |
| Is a discipline problem on playground             |        |         |        |       |          |
| Sense of humor                                    |        |         |        |       |          |
| Creativity  |        |         |        |       |          |
| Persistence                                       |        |         |        |       |          |

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

\_\_\_\_\_

Please comment on the applicant's challenges as a student. \_\_\_\_\_

\_\_\_\_\_

Has he/she been identified as gifted, learning disabled and/or worked with a learning specialist? Do you have any concerns about his/her emotional, social, and/or cognitive development? If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

Are the parents supportive of the child? Are they supportive of school policies and faculty? Do they interact in the school's life? \_\_\_\_\_

\_\_\_\_\_

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** \_\_\_\_\_