COMMON CONFIDENTIAL STUDENT EVALUATION FORM (Pre K - K Grade Applicants)





CHILD'S NAME (FIRST, MIDDLE, LAST)

DATE OF BIRTH (MONTH/DAY/YEAR)

APPLYING TO GRADE

To be completed by the parent/guardian: Complete the above information and read/sign the statement below. Give a signed copy of this form to your child's teacher(s) and request that they send it directly to the schools to which your child is applying by each school's due date.

For the child named above, I give my permission to release the information on this form to the school(s) to which I am applying and understand that I will not have access to this confidential information. In addition, I permit my child's current school staff to speak with and/or welcome a visit from any inquiring admission staff member, so that they may learn more about my child for admissions purposes. All communication between schools will remain confidential, and I will not have access to the content of any conversation.

NAME OF PARENT/GUARDIAN (PLEASE PRINT)

SIGNATURE OF PARENT/GUARDIAN

DATE

To be completed by the teacher/school: Save a copy of this completed form for your records and send a copy directly to each of the indicated schools.

FORM COMPLETED BY (PRINT NAME)		SITION	DATE	
SIGNATURE	EMAIL		PHONE NUMBER	
SCHOOL NAME		I AM THE CHILD'S 🗆 CURRENT TEA	CHER	
CHILD'S ENROLLMENT START DATE	E END DATE	HOW LONG HAVE YOU KNOWN THIS (CHILD?	
WHAT IS THE CHILD'S PRIMARY LA	NGUAGE? (PLEASE LIST ADDITIONAL LANGUAGES, IF AI	PPLICABLE) LENGTH OF S	CHOOL DAY # OF DAYS PER WEEK	
Character & Disposition	Please mark all that consistently describe	e the child:		
 □ Easy going □ Cheerful □ Confident □ Observer □ Patient 	 Enthusiastic about learning Enthusiastic about play Defiant Can't sit still Easily frustrated 	 Resilient Slow to warm up Short tempered Physically hurtful Cries when frustrated 	 Tends to lead Tends to follow Tends to be alone Tends to choose large group Tends to choose small group 	

What words come to mind to describe this student?

What are the student's strengths?

What are this student's challenges and growth areas?

Describe this student's approach to learning (hands on, visual, kinetic, auditory, logical). What most engages this child?

Describe the student's ability to develop friendships and resolve conflicts:

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CHILD'S NAME (FIRST, LAST)

For each item in the tables below, please check the most appropriate description:

DEVELOPMENT	Consistently	Sometimes	Rarely	No Opportunity to Observe
Speech is easily understood				
Positive interaction with peers				
Positive relationships with adults/teachers				
Aware of others' needs, shows empathy				
Uses words to resolve conflict				
Able to solve problems without adult help				
Demonstrates body and space awareness				
Demonstrates fine motor coordination				
Able to verbally communicate feelings, needs, ideas				
Shows responsibility for belongings				
Demonstrates self-help skills				
Is willing to participate in room clean-up				

APPROACH TO LEARNING	Consistently	Sometimes	Rarely	No Opportunity to Observe	Comments:
Completes tasks					
Makes transitions easily					
Listens and follows directions					
Demonstrates attention span for teacher-led activity					
Demonstrates attention span for self-chosen activity					
Able to work and play independently					
Able to work and play cooperatively					
Able to be redirected by teacher					
Tries new activities of own choice					
Tries new activities that are teacher-directed					
Needs teacher support to stay on tasks					

FAMILY ENGAGEMENT	Consistently	Sometimes	Rarely	No Opportunity to Observe
Separates easily from parent/guardian(s)				
Parent(s) set appropriate limits with child				
Child responds to limits of parent(s)				
Parent(s) are responsive to feedback and recommendations				
Parent(s) have realistic expectations of child				
Parent(s) contribute to the classroom and participate in school activities				
Parent(s) support school procedures and expectations				
Parent(s) are respectful of teacher's time (i.e. on time arrival/pick-up)				

Describe the family's participation in the school community:

□ Check here if any information pertaining to this child/family would be better communicated by phone.

The best number and days/times to reach me are: _

It is only necessary to complete this form once. Consult with the child's parent/guardian regarding the school(s) to which the family is applying. Please save this completed form for your records and send a copy directly to each of the indicated schools. We sincerely appreciate your cooperation in evaluating this applicant honestly and assure you that this information will be held in confidence.