

Confidential Current Teacher Evaluation

Pre-K-Sixth Grade



Applicant's full name _____ Applying to grade _____
FIRST MIDDLE LAST

To the Applicant Family:

Please submit this form to the applicant's current teacher, allowing time for completion and return by the deadline. I waive my right of access and that of my child to this teacher evaluation form. I understand that its content will not be made available by either the referring or receiving school.

Parent's/Guardian's Signature (required prior to completion of this form) _____

To the Current Teacher:

The above named student is applying for admission to The Guthrie School. As part of the admission process, please assess the student as compared with his or her peers. Please be assured that all of the information you provide will be held in strict confidence. The applicant's family has waived their rights of access to this evaluation form's content upon submitting their application. You may scan and email this form to mary.hearty@guthrieschool.com. You may also mail the original to The Guthrie School Admission Office. Please be sure to keep a copy for your files and submit to The Guthrie School by February 2, 2018. We appreciate your time and effort in completing this evaluation.

Social/Emotional Development

	Below Expectations	Average	Above Level	Outstanding/ Among the Best I've Ever Seen	No Basis
Attention Span					
Ability to follow directions					
Ability to complete tasks					
Ability to work in groups					
Attitude toward teachers					
Attitude toward peers					
Attitude of peers toward 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 toward child					
Parental expectations toward school					

School Performance

Language ability					
Fluency in English					
Vocabulary					
Writing Skills					
Reading Fluency					
Reading Comprehension					

	Below Expectations	Average	Above Level	Outstanding/Among the Best I've Ever Seen	No Basis
Oral Communication Skills					
Mathematical Concepts					
Problem Solving					
Creativity					
Effort/Determination/Responsibility					
Citizenship/Conduct					
Is English his or her primary language?	Yes	No			

Aesthetic Development

Art					
Music					
Drama/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					
Absences					
Tardies					

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/weaknesses:

4. Please describe parental expectations, support, and attitude toward applicant and school.

5. Has outside help, enrichment, tutoring, or testing been recommended? YES NO (If yes, please elaborate).

6. Please include other pertinent information (attach additional sheet if necessary):

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

Please select from the following recommendations

Highly recommend

Recommend

Recommend with reservations because _____

Do not recommend because _____

Please PRINT the following:

Name Title/Position Date

School Phone

Course Taught Number of Years Teaching Applicant

Email Address

May we contact you with follow up on these questions? YES NO

It is the policy of The Guthrie School to administer its educational programs, including admission, without regard to race, color, religion, sex, sexual orientation, national or ethnic origin, or disability.

THE GUTHRIE SCHOOL
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