

## Teacher Evaluation for Student Entering Grades 1-8

| Student's Name                      |          | Applicant for Gr       | Applicant for Grade     |                       |  |
|-------------------------------------|----------|------------------------|-------------------------|-----------------------|--|
| Please circle the appropriate       | ratings: |                        |                         |                       |  |
| Academic potential                  | Fair     | Average                | Good                    | Outstanding           |  |
| Academic achievement                | Fair     | Average                | Good                    | Outstanding           |  |
| Effort                              | Fair     | Average                | Good                    | Outstanding           |  |
| Study habits                        | Fair     | Average                | Good                    | Outstanding           |  |
| Ability to work in a group          | Fair     | Average                | Good                    | Outstanding           |  |
| Ability to work alone               | Fair     | Average                | Good                    | Outstanding           |  |
| Follows direction                   |          | Needs much explanation | Occasionally needs help | Quickly and correctly |  |
| Uses suggestions/corrections        |          | Rarely                 | Usually                 | Always                |  |
| Attention span                      |          | Easily<br>distracted   | Occasionally distracted | Exceptionally good    |  |
| Maturity given the age of the child |          | Immature               | Average                 | Mature                |  |
| Classroom behavior                  |          | Disruptive             | Acceptable              | Good                  |  |
| Respectful of adults                |          | Sometimes              | Usually                 | Always                |  |
| Cooperation of parents              |          | Fair                   | Good                    | Outstanding           |  |



| In two or three sentences, please describe this back of this paper. | s student. Further comments may be written | on the |
|---|--|--------|
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|   |  |        |
| Teacher's signature   | <del></del>                                |        |
| Date  |  |        |
| Telephone Number or Email address                                   |  |        |
| Your school name and address  |  |        |