

Independent Schools of the San Francisco Bay Area Common Confidential Student Evaluation Form (Pre K - 1st Grade Applicants) www.issfba.org

Child's Name	Last	First	Date of Birth Appl Middle Month/Day/Year				lying to Grade		
			·						
				e information and re directly to the school					
applying and un school staff to s about my child t	nderstand that I will speak with and/or w	not have elcome a oses. All	access to this c visit from any ir	the information on the onfidential information of the option of the opti	on. In addition, I p aff member, so th	ermit my child's cur nat they may learn r	rrent more		
Name of parent/guardian (please print)						Date			
Signature of parent	t/guardian								
To be completed i	by the teacher: It is	only ned	cessary to comp	lete this form once. (Consult with the c	hild's parent/guardi	an regarding		
the school(s) to wh of the indicated sch	ich the family is app nools. We sincerely	olying. <u>Ple</u> apprecia	ease save this c te your coopera	ompleted form for yo tion in evaluating this t/guardian has signe	our records and er applicant hones	mail or mail a copy	directly to each		
Name of School				I am the s	student's Curre	ent Teacher D Pre	evious Teacher		
Child's Enrollment	Start Date		Fnd Date	 Ho	ow long have you	known this child?			
le English the child	's primary language	.2	End Bate	L ength o	f school day	Number of days	ner week		
is English the child	s primary language	; ·	(If not Er	Length o	i scriooi day	Number of days	per week		
List three words to	describe this child:	1		2		_ 3			
For each item in t	he tables below, p	lease ch	eck the most d	evelopmentally age	-appropriate de	scription of this ch	nild.		
Pre-Academic C	-			Needs Improvement			Advanced		
Fine motor coordinate		es. etc.)	Not Evident			/ igo / ippropriate	, tavanoou		
Uses appropriate p		, ,							
Draws with details	y .								
Completes tasks									
Speech is clear and	d understandable								
Vocabulary									
Ability to stay on di									
Tells story events in									
Asks questions to e		ng							
Sound-symbol corr									
Recognizes letters:									
D	lower case								
Recognizes numer									
Recognizes shapes	S								
Transitions easily Listens to directions	•								
Follows multi-step of Attention span for t									
Ability to work inde									
Ability to focus and		aroun							
Ability to focus and									
Hand Dominance:	□ Right □ Left	•	Established				1		
Comments:	Li Nigiti Lett	L NOI	LStabilished						
Personal Charac	cteristics		Not Evident	Needs Improvement	Emerging	Age Appropriate	Advanced		
Self-help skills (clot		ch. etc.)				- I igo i ippi opi iato	7101000		
Self motivation		,,							
Demonstrates self-	esteem								
Acceptance of limit									
Sense of humor									
Curiosity									
Attention span for s	•								
Follows classroom	procedures								
Usually takes role of:	☐ Leader ☐ Foll	ower \square	Varies						
Comments:									

Child's Name			No. 1 II				
Last	First		Middle				
For each item in the tables below, please che	eck the most de	velopmentally age	e-appropriate des	cription of this c	hild:		
Social & Physical Development	Not Evident	Needs Improvement	Emerging	Age Appropriate	Advanced		
Separation from parents/guardians/caregivers Interaction with parents/guardians							
Ability to share and work cooperatively							
Ability to wait turn							
Cooperative attitude							
Empathy toward others							
Responds positively to redirection Ability to resolve problems verbally							
Ability to resolve conflict without physical							
engagement							
Accepts responsibility for actions							
Demonstrates self-control							
Integrity/trustworthiness Interaction with peers in classroom							
Interaction with teachers							
Participates in physical group activities							
Ability to engage in positive interactions on							
the playground							
Body and space awareness Gross motor coordination: balance, gait,							
fluidity							
Usually chooses: ☐ Large group ☐ Small	Laroup \square	Alone	<u> </u>		I		
	. g.oup — ,	10110					
Comments:							
-							
Family Information	Did Not Observe	Rarely	Sometimes	Usually	Consistently		
Has realistic expectations of child							
Follows through with school recommendations							
Participates in school activities Cooperates with classroom teachers							
Cooperates with school administration							
Is punctual with drop-off & pick-up procedures							
Respectful of teachers' time							
Comments:							
What are this child's strengths?							
What are this child's challenges?							
Describe this child's approach to learning (hands on, v	visual, kinetic, audi	tory, logical) and/or w	hat kind of classroom	environment would	be a good match		
for this child.					· ·		
CDECIFIC DECOMMENDATION:							
SPECIFIC RECOMMENDATION:	December of decidents	u	- Doofeen				
	Recommended wit (please explain be			ot to make a recomn explain below)	nendation		
	u	- · /	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
☐ Check here if any information pertaining	to this child/fam	nily would be botto	ar communicated	hy nhone Please	e feel free to		
add further narrative on additional page(s	s) if desired.	iny would be bette	er communicated	by phone. I leas	e leel liee to		
Form completed by (print name)		Position	Position Date				
Your signature		Email	Email Phone				
-							
School name Director/Principal's email							
Director/Principal's name	Director/Prin	Director/Principal's phone					