

MATH:

Knowledge of basic skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application of skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Names of textbook(s) and publisher(s): _____

WORK SKILLS

Class participation	<input type="checkbox"/> Joins in readily	<input type="checkbox"/> Contributes occasionally	<input type="checkbox"/> Wants to dominate	<input type="checkbox"/> Rarely contributes
Ability to work in a group	<input type="checkbox"/> Consistently works well	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Has difficulty	<input type="checkbox"/> Has great difficulty
Able to work independently	<input type="checkbox"/> Consistently works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs constant help
Completes work on time	<input type="checkbox"/> Consistently on time	<input type="checkbox"/> Usually on time	<input type="checkbox"/> Needs additional time	<input type="checkbox"/> Has difficulty
Follows directions	<input type="checkbox"/> Easily and accurately	<input type="checkbox"/> Occasionally needs help	<input type="checkbox"/> Needs much explanation	<input type="checkbox"/> Rarely
Takes initiative	<input type="checkbox"/> Always	<input type="checkbox"/> Usually	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Rarely
Attention span	<input type="checkbox"/> Actively engaged	<input type="checkbox"/> Attentive	<input type="checkbox"/> Variable attention	<input type="checkbox"/> Requires redirection
Fine motor skills	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

SOCIAL SKILLS

Peer relations	<input type="checkbox"/> Role model	<input type="checkbox"/> Healthy relationships	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Relates poorly
Relationships with adults	<input type="checkbox"/> Courteous	<input type="checkbox"/> Usually positive	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Shows little respect
Concern for others	<input type="checkbox"/> Very considerate	<input type="checkbox"/> Considerate	<input type="checkbox"/> Usually considerate	<input type="checkbox"/> Rarely considerate
Attitude toward school	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

PERSONAL QUALITIES:

Integrity	<input type="checkbox"/> Highly trustworthy	<input type="checkbox"/> Trustworthy	<input type="checkbox"/> Usually trustworthy	<input type="checkbox"/> Questionable
Sense of humor	<input type="checkbox"/> Highly developed	<input type="checkbox"/> Good	<input type="checkbox"/> Fair humor	<input type="checkbox"/> Poor
Spirit of cooperation	<input type="checkbox"/> Always cooperates	<input type="checkbox"/> Cooperates	<input type="checkbox"/> Occasionally cooperates	<input type="checkbox"/> Poor
Leadership potential	<input type="checkbox"/> Leader	<input type="checkbox"/> Can follow or lead	<input type="checkbox"/> Leads on occasion	<input type="checkbox"/> Rarely leads
Self-confidence	<input type="checkbox"/> Healthy self-image	<input type="checkbox"/> Needs some support	<input type="checkbox"/> Seems over confident	<input type="checkbox"/> Poor
Responsible	<input type="checkbox"/> Very responsible	<input type="checkbox"/> Usually responsible	<input type="checkbox"/> Sometimes responsible	<input type="checkbox"/> Rarely
Emotional maturity	<input type="checkbox"/> Very mature	<input type="checkbox"/> Age appropriate	<input type="checkbox"/> Sometimes immature	<input type="checkbox"/> Very immature
Citizenship	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Attitude toward school	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Self-control	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Reaction to criticism	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

Comments on above: _____

Areas in which the applicant has the greatest strength(s): _____

Area in which the applicant has the greatest need(s): _____

To your knowledge, has the applicant even been a recipient of a special services program (i.e. gifted, learning disability, speech)?

Yes No Unknown If yes, please explain: _____

Please comment on degree and type of parental involvement: _____

In what capacity and how long have you known this child? _____

Your Job Title: _____

If the need arises, may we contact you to discuss the applicant further? Yes No

Telephone: (_____) _____ Email: _____

PRINT NAME OF TEACHER/DIRECTOR

SIGNATURE OF TEACHER/DIRECTOR