



Hawai'i Association of Independent Schools (HAIS)

Confidential Teacher Reference Report | *1st through 12th Grades*

- English/Language Arts Teacher
 Math Teacher
 Self-contained Classroom Teacher
 Other core academic Teacher _____

Parent/Legal Guardian: Please fill out this section and deliver this form to your child's teacher. Include an addressed and stamped envelope to the school(s) to which you would like this evaluation sent. The evaluator will mail these forms directly to that/those school(s).

Applicant's Name _____ Preferred Name: _____
Last First M.I.

Gender: M F Birthdate: ____/____/____ Applying for Grade: ____ Applicant's Current School: _____

To Parent/Legal Guardian: By submitting this evaluation form and your application for consideration by the member of the Hawai'i Association of Independent Schools (HAIS), you hereby release the HAIS school, its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from information provided. All information provided on the attached evaluation form will be held in strictest confidence and will not be shared with students, parents, or guardians. This evaluation will remain confidential and does not become part of the student's permanent academic record.

Parent/Legal Guardian's Signature _____ Date ____/____/____

To The Teacher: Your candid appraisal of this child will be of invaluable assistance in giving us a complete and fair evaluation of this applicant. We appreciate your cooperation; your evaluation will be held in strict confidence.

ACADEMIC SKILLS	Excellent	Good	Fair	Poor	No Basis for Judgment
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"/>
Knowledge of basic skills	<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"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abstract Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination/Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Areas in which the applicant has the greatest strengths: _____

Areas in which the applicant has the greatest needs: _____

WORK SKILLS				
Ability to work in a group	<input type="checkbox"/> Consistently works well	<input type="checkbox"/> Occasionally has trouble	<input type="checkbox"/> Usually has difficulty	<input type="checkbox"/> Has great difficulty
Ability 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
Attention span	<input type="checkbox"/> Actively engaged	<input type="checkbox"/> Attentive	<input type="checkbox"/> Variable attention	<input type="checkbox"/> Requires frequent redirection
Class participation	<input type="checkbox"/> Joins readily	<input type="checkbox"/> Contributes occasionally	<input type="checkbox"/> Wants to dominate	<input type="checkbox"/> Rarely contributes
Completes assignments on time	<input type="checkbox"/> Consistently	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs additional time	<input type="checkbox"/> Has difficulty
Quality of work	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Follows directions	<input type="checkbox"/> Easily and accurately	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs much explanation	<input type="checkbox"/> Rarely
Takes initiative	<input type="checkbox"/> Consistently	<input type="checkbox"/> Usually	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Rarely

SOCIAL SKILLS AND PERSONAL QUALITIES				
Attitude toward school	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Citizenship	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Concern for others	<input type="checkbox"/> Very considerate	<input type="checkbox"/> Usually considerate	<input type="checkbox"/> Occasionally considerate	<input type="checkbox"/> Rarely considerate
Emotional maturity	<input type="checkbox"/> Very mature	<input type="checkbox"/> Age appropriate	<input type="checkbox"/> Sometimes immature	<input type="checkbox"/> Very immature
Integrity	<input type="checkbox"/> Highly trustworthy	<input type="checkbox"/> Usually trustworthy	<input type="checkbox"/> Occasionally trustworthy	<input type="checkbox"/> Questionable
Leadership potential	<input type="checkbox"/> Leader	<input type="checkbox"/> Can follow or lead	<input type="checkbox"/> Leads on occasion	<input type="checkbox"/> Rarely leads
Relationships with peers	<input type="checkbox"/> Role model	<input type="checkbox"/> Healthy relationships	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Relates poorly
Reaction to criticism/setbacks	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Relationships with adults	<input type="checkbox"/> Courteous	<input type="checkbox"/> Usually positive	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Shows little respect
Responsibility	<input type="checkbox"/> Very responsible	<input type="checkbox"/> Usually responsible	<input type="checkbox"/> Sometimes responsible	<input type="checkbox"/> Rarely responsible
Self-confidence	<input type="checkbox"/> Healthy self-image	<input type="checkbox"/> Needs some support	<input type="checkbox"/> Seems over-confident	<input type="checkbox"/> Poor self-image
Self-control	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Sense of humor	<input type="checkbox"/> Highly developed	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poorly developed
Spirit of cooperation	<input type="checkbox"/> Consistently cooperates	<input type="checkbox"/> Usually cooperates	<input type="checkbox"/> Occasionally cooperates	<input type="checkbox"/> Rarely cooperates
Warmth of personality	<input type="checkbox"/> Consistently friendly	<input type="checkbox"/> Usually friendly	<input type="checkbox"/> Occasionally friendly	<input type="checkbox"/> Rarely friendly

Evaluator: Your completion of the following section to the extent you are able is greatly appreciated!

Please share any additional comments about the applicant's personal characteristics and qualities: _____

Describe the ways the applicant contributes to your school community (character, citizenship, leadership, athletic or artistic): _____

Thank you for your time and evaluation of this applicant. May we contact you if we have questions?

(_____) _____ - _____
 Phone Email

How long and in what capacity have you known the applicant? _____

 Teacher's name (please print or type) | Subject taught

 Signature Date / /