



## NOTRE DAME ELEMENTARY SCHOOL

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Has applied for admission to Notre Dame Elementary for the 2021-2022 school year.

Notre Dame Elementary School is committed to a strong academic focus.

It is important that we receive information evaluating your student's sense of responsibility, self-discipline and motivation. This is a part of the normal application process, not a notice of acceptance to our school.

All information will be kept confidential. Please complete the applicable form (entering kindergarten, entering 1st grade *or* entering 2nd-8th grade) and return it to Notre Dame Elementary School at your earliest convenience.

Thank you for your time and cooperation

Sincerely,

**Sr. Kathryn Keenan**  
**Principal**



## ENTERING KINDERGARTEN

NAME OF CHILD \_\_\_\_\_

Current School: \_\_\_\_\_

Type of Educational Program (i.e. play based, traditional academic, etc.): \_\_\_\_\_

Please circle the appropriate rating for each of the following:

5 = accomplished/achieved/does 90% of the time

3= in progress

1 = needs more experience or time

Verbalizes own feelings	1	2	3	4	5
Works & plays cooperatively	1	2	3	4	5
Participates with others in group activities	1	2	3	4	5
Takes turns & shares	1	2	3	4	5
Shows self-control	1	2	3	4	5
Adjusts easily to new situations	1	2	3	4	5
Willing to try new tasks	1	2	3	4	5
Follows directions	1	2	3	4	5
Observes rules	1	2	3	4	5
Listens attentively at story time	1	2	3	4	5
Speaks clearly	1	2	3	4	5
Expresses ideas in sentences	1	2	3	4	5
Asks questions, seeks help when needed	1	2	3	4	5
Concentrates on task given	1	2	3	4	5
Manipulates & builds with construction shapes	1	2	3	4	5
Produces designs or pictures with art materials	1	2	3	4	5
Has a good attention span	1	2	3	4	5
Has good gross motor control (running, climbing, riding a tricycle)	1	2	3	4	5
Has good fine motor control (holds pencil properly, uses scissors)	1	2	3	4	5

Parents show healthy concern for child	Usually	Often	Sometimes	Seldom
Parents follow up on teacher suggestions	Usually	Often	Sometimes	Seldom



Additional comments and/or observations that might be helpful in understanding this child.

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Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_



## ENTERING 1<sup>ST</sup> GRADE

NAME OF CHILD: \_\_\_\_\_

Current School: \_\_\_\_\_

Name of reading program and placement \_\_\_\_\_

**Please indicate the student's behavior in each of the areas listed:**

	USUALLY	OFTEN	SOMETIMES	SELDOM
Shows healthy levels of self-esteem				
Works and plays well with others				
Practices self-control				
Listens attentively				
Follows directions				
Concentrates on the job at hand				
Works well independently				
Makes good use of time				
Shows creativity				
Parents show healthy concern for child				
Parents follow up on teacher suggestions				

Additional comments and/or observations that might be helpful in understanding this child:

\_\_\_\_\_  
\_\_\_\_\_

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_



**ENTERING 2<sup>ND</sup> – 8<sup>TH</sup> GRADE**

NAME OF CHILD \_\_\_\_\_

Current School \_\_\_\_\_

**Please indicate the student's behavior in each of the areas listed:**

<b>Academic Qualities</b>				
	Excellent	Good	Fair	Below Average
Study habits				
Motivation				
Ability to learn				
Oral communication skills				
Ability to work independently				
Intellectual curiosity				
Attention span				
<b>Personal Qualities</b>				
	Excellent	Good	Fair	Below Average
Personal conduct				
Self confidence				
Leadership potential				
Concern for others				
Participation in school community				
Respect for authority				
Creativity				
Respect accorded by her/her peers				
Emotional maturity				
<b>Parent Information</b>				
	Excellent	Good	Fair	Below Average
Support of family for school policies				



1. Are there any factors that have had an impact on this student's academic or social progress to date?
2. Has the student been placed in any special school programs (accelerated classes, resource/learning specialist, etc.) or received any special learning accommodations (for example: extended time, untimed or oral testing, adjusted assignments, etc.)?
3. Please compare this student's academic achievement to his/her ability.
4. Please comment on this student's disciplinary and attendance record at your school.
5. Additional comments and/or observations that might be helpful in understanding this child:

### Overall Recommendation

<input type="checkbox"/>	I strongly recommend this applicant.
<input type="checkbox"/>	I recommend this applicant.
<input type="checkbox"/>	I recommend this applicant with reservations.
<input type="checkbox"/>	I do not recommend this applicant.
<input type="checkbox"/>	Please call me regarding this applicant and ask for _____

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_