

TEACHER'S CONFIDENTIAL REPORT

Parents should give this form to the class teacher for completion.

Dear Teacher,

Your student is applying for admission to ICS Paris, an international school where subjects are taught principally in English. This assessment is an important part of the application and your cooperation in providing a full report will be greatly appreciated. Parents should not have access to this confidential report – once completed, please send it directly to admissions@icsparis.fr

Student's surname: _____ Student's first name: _____ <i>(please use capital letters)</i>
School name: _____
○ Grade / ○ Year enrolled: _____ 12 or 13 year system: ○ 12 (K-12) / ○ 13 (Year 1-Year 13)
School website: _____
Main language of instruction in your class: _____

PLEASE TICK THE STATEMENTS THAT MOST DESCRIBE THIS CHILD

Positive member of the classroom	<input type="checkbox"/>	Resilient	<input type="checkbox"/>
Positive relationship with adults/teachers	<input type="checkbox"/>	Cheerful	<input type="checkbox"/>
Positive interaction with other students	<input type="checkbox"/>	Confident	<input type="checkbox"/>
Responsive to classroom limits	<input type="checkbox"/>	Defiant	<input type="checkbox"/>
Responsive to teacher directions	<input type="checkbox"/>	Short-tempered	<input type="checkbox"/>
Willing to try new things	<input type="checkbox"/>	Easily frustrated	<input type="checkbox"/>
Enthusiastic about learning	<input type="checkbox"/>	Physically hurtful when frustrated	<input type="checkbox"/>
Respects personal space	<input type="checkbox"/>	Has difficulty with large motor skills	<input type="checkbox"/>
Aware of others' needs	<input type="checkbox"/>	Has difficulty with small motor skills	<input type="checkbox"/>
Stays focused	<input type="checkbox"/>		

SOCIAL/EMOTIONAL DEVELOPMENT

	Never	Rarely	Sometimes	Usually	Often	Always
Works and plays cooperatively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enters group activities appropriately	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cries when frustrated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chooses to be alone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tends to lead	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tends to follow	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Uses words to resolve a conflict	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is able to be redirected by teacher	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accepts responsibility for behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is able to solve problems without adult help	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please add additional information from your observations and interactions with this child:

APPROACH TO LEARNING

	Never	Rarely	Sometimes	Usually	Often	Always
Tries new activities of their own choice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needs help to focus on this chosen activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tries new activities that are teacher-directed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needs teacher support to stay on task	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Makes transitions easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Follows classroom routines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please add additional information from your observations and interactions with this child:

LANGUAGE DEVELOPMENT

	Never	Rarely	Sometimes	Usually	Often	Always
Understands and follows oral directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is able to communicate ideas, feelings & needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speech is easily understood	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

OTHER

	Never	Rarely	Sometimes	Usually	Often	Always
Responsible for belongings (i.e. coat, lunchbox)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Uses toilet independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is willing to participate in room clean-up	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Separates easily from parent(s) at drop-off	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parent(s) responsive to teacher feedback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

SPECIAL NEEDS

If you answer "yes" to any of the below questions, please elaborate in the space provided

Have you made, or do you plan to make, any recommendations for professional support or assessment?

Yes No Please comment and/or state reasons for any referrals:

Does the student have any learning difficulties or special needs? Yes No

Have any modification(s) been provided in the student's learning curriculum? Yes No

Have any accommodation(s) been provided to this student in class learning? Yes No

Has the child experienced academic, social, emotional, and/or behaviour difficulties in school: Yes No

Has this child received (check all that may apply):

- | | |
|--|--|
| <input type="checkbox"/> Psychiatrist's education evaluation | <input type="checkbox"/> Counselling |
| <input type="checkbox"/> Therapy – speech, occupational, and/or physical | <input type="checkbox"/> Individualized Education Plan (IEP) |
| <input type="checkbox"/> Other – Please specify: | |

We welcome any **additional comments** you think might be helpful to us, including special interests or talents, and special educational or emotional needs. If you have made, or are planning to make, any recommendations for professional support or assessment, please describe below:

Name and position of person completing this form:

Date

Signature

School stamp:

Please return this completed form directly to:

ICS Paris - International School – Admissions

23 rue de Cronstadt, 75015 PARIS – France

Telephone: +33 (0)1 56 56 60 31

Email: admissions@icsparis.fr