Grades 2 – 12

Baltimore Independent School Council

C O M M O N R E F E R R A L F O R M

Please do not complete this form before November 15. Return by January 15.

The AIMS member schools abide by the policy that all information provided on the Common Referral Form will be held in the strictest confidence and will not, directly or indirectly, be shared with students, parents or guardians.

Name of Student _____ Current School_____ Present Grade _____

Subject Area_____ Textbook(s)_____ ☐ honors ☐ standard ☐ _____

I have known this student for _____years, _____months Attendance is ☐ regular ☐ not regular.

The first words that come to mind when I think of this student are_____.

Academic Ability	*Outstanding*	*Above Average*	*Average*	*Below Average*
Verbal ability	☐	☐	☐	☐
Mathematical Ability	☐	☐	☐	☐
Creative ability	☐	☐	☐	☐
Intellectual curiosity	☐	☐	☐	☐
Ability to grasp new concepts	☐	☐	☐	☐

Please comment on this child's academic strengths and weaknesses.

Classroom Performance	*Outstanding*	*Above Average*	*Average*	*Below Average*
Classroom achievement	☐	☐	☐	☐
Participation in discussions	☐	☐	☐	☐
Writing mechanics	☐	☐	☐	☐
Quality of written ideas	☐	☐	☐	☐
Oral expression	☐	☐	☐	☐
Work habits	☐	☐	☐	☐
Ability to follow directions	☐	☐	☐	☐
Preparation for class	☐	☐	☐	☐

Please comment on this child's learning style. Please also note any special needs and any observed discrepancies between academic ability and classroom performance.

School Behavior	*Outstanding*	*Above Average*	*Average*	*Below Average*
Motivation	☐	☐	☐	☐
Ability to work in a group	☐	☐	☐	☐
Ability to work independently	☐	☐	☐	☐
Response to suggestions	☐	☐	☐	☐
Willingness to seek needed help	☐	☐	☐	☐
Attention span	☐	☐	☐	☐
Interaction with peers	☐	☐	☐	☐
Respect for others	☐	☐	☐	☐
Conduct	☐	☐	☐	☐

Please comment on any noteworthy aspect of the student's school behavior.

OVER ⟹

Personal Abilities	*Outstanding*	*Above Average*	*Average*	*Below Average*
Maturity for grade	☐	☐	☐	☐
Maturity for age	☐	☐	☐	☐
Perseverance	☐	☐	☐	☐
Self-confidence	☐	☐	☐	☐

Please comment on this student's social and emotional development.

Please circle the words that describe this student:

aggressive	conscientious	easily frustrated	irritable	overprotected	restless
anxious	dishonest	follower	kind	passive	self-centered
articulate	disobedient	honest	loner	passive-resistant	self-disciplined
assertive	distractible	humorous	manipulative	perfectionist	social
cheerful	distracting	impulsive	motivated	popular	vivacious
compassionate	energetic	independent	negative leader	positive leader	well-liked
confident	easily discouraged	irresponsible	organized	responsible	other_____

Please note any special attributes of this student that would help us to better understand him or her (e.g., English as a second language, special talent in arts or athletics, etc.).

Please comment on the student-parent relationship.

Please describe the parents' relationship with teachers and the school.

Would you be willing to discuss this child by telephone if we have further questions? ☐ Yes ☐ No

Is there information about this child that would be better communicated by telephone? ☐ Yes ☐ No

Evaluator's Name (please print) _____ Position_____

Signature _____ Date _____

E-mail address _____ Telephone Number _____

For a School Administrator

Has the family satisfied all financial obligations to your school? ☐ Yes ☐ No Initials _____

(*Many AIMS schools will not enroll a student until the family has met all financial obligations to the school previously attended by the student.)*

Revised April 2014