

CONFIDENTIAL TEACHER EVALUATION FORM

DUE DATE

Student is applying for grade

☐ 9 ☐ 10 ☐ 11 ☐ 12

***This form is confidential and will be used solely for admissions and placement;
it includes common admissions questions developed by Catholic high schools in the Archdiocese of Seattle.
Only the transcript will become part of the student's permanent record.***

Please complete this page and give the entire form to the student's current teacher in a core academic subject. He/she will return it directly to the schools you check below.

TO BE COMPLETED BY APPLICANT

Student Name
last first middle preferred

Address
city state ZIP

Home Phone: Sex: ☐ F ☐ M Birthdate:

Current School:

Parents/Guardians:

Name	Phone (home)	Phone (work /cell)	E-mail
Name	Phone (home)	Phone (work /cell)	E-mail

I hereby give permission for my daughter's/son's transcript to be forwarded to the Catholic high schools indicated below.

Type name of Parent/Guardian completing form

Date

Please check appropriate boxes:

☐ **Archbishop Thomas J. Murphy High School**
12911 39th Ave. SE, Everett, WA 98208-6159
(425) 332-3036

www.am-hs.org admissions@am-hs.org

☐ **Bishop Blanchet High School**
8200 Wallingford Ave. N, Seattle, WA 98103-4599
(206) 527-7741

www.bishopblanchet.org mpierce@bishopblanchet.org

☐ **Cristo Rey Jesuit Seattle High School**
10001 57th Ave S, Seattle, WA 98178
(206) 688-2100

www.cristoreyseattle.org admissions@cristoreyseattle.org

☐ **Eastside Catholic School**
232 228th Ave. SE, Sammamish, WA 98074-7207
(425) 295-3000

www.eastsidecatholic.org lleach@eastsidecatholic.org

☐ **Forest Ridge School of the Sacred Heart**
4800 139th Ave. SE, Bellevue, WA 98006-3099
(425) 641-0700

www.forestridge.org admissions@forestridge.org

☐ **Holy Names Academy**
728 21st Ave. E, Seattle, WA 98112-4058
(206) 323-4272

www.holynames-sea.org admissions@holynames-sea.org

☐ **John F. Kennedy Catholic High School**
140 S 140th St., Burien, WA 98168-3496
(206) 246-0500

www.kennedyhs.org admissions@kennedyhs.org

☐ **O'Dea High School**
802 Terry Ave., Seattle, WA 98104-1294
(206) 622-1308

www.odea.org kpatterson@odea.org

☐ **St. Monica Academy**
4320 87th Ave SE, Mercer Island, WA 98040
(206) 232-5432 x174

www.stmonicasea.org griehl@stmonicasea.org

☐ **Seattle Preparatory School**
2400 11th Ave. E, Seattle, WA 98102-4098
(206) 577-2146

www.seaprep.org schooldocs@seaprep.org

TO BE COMPLETED BY THE TEACHER

Please complete the remaining pages of this confidential form as accurately as possible and sign at the bottom of Page 3. If you would like a telephone conference to provide additional information, indicate at the bottom of Page 3. If the student is applying to more than one high school, please photocopy this completed evaluation form and send a copy, by the due date, to the high schools indicated by the applicant on the previous page.

Name of person completing form E-mail

Position Subject taught

School Telephone Ext.

How long have you known the applicant? In what capacity?

What are the first few words that come to mind to describe the applicant?

THE STUDENT:	All of the time	Most of the time	Some of the time	Rarely	Comments
Displays intellectual creativity	☐	☐	☐	☐	
Demonstrates higher-level thinking skills	☐	☐	☐	☐	
Works to potential	☐	☐	☐	☐	
Participates actively in class	☐	☐	☐	☐	
Works well independently	☐	☐	☐	☐	
Works well with others	☐	☐	☐	☐	
Completes work on time	☐	☐	☐	☐	
Manages time effectively	☐	☐	☐	☐	
Is punctual	☐	☐	☐	☐	
Responds appropriately to criticism	☐	☐	☐	☐	
Takes responsibility for actions	☐	☐	☐	☐	
Cooperates with teachers	☐	☐	☐	☐	
Respects the learning environment	☐	☐	☐	☐	
Relates well to others	☐	☐	☐	☐	
Treats others with respect and dignity	☐	☐	☐	☐	
Demonstrates integrity	☐	☐	☐	☐	
Demonstrates leadership qualities	☐	☐	☐	☐	
Participates in school activities	☐	☐	☐	☐	

Student Name

Please give your realistic appraisal of the student's academic strengths/weaknesses and work ethic. Indicate any unique talents, personal qualities, or special circumstances. Be sure to describe special accommodations, or modified curricula needed in the classroom.

Please leave this box blank until you have saved or copied the appropriate number of completed forms for the student, remembering to fill in the placement information on Page 3. Then, if you would like to add any specific information pertaining to a particular school, please do so in the space provided below.

SPECIFIC INFORMATION FOR

name of high school

I recommend this student for the high school designated above

☐

enthusiastically

☐

with confidence

☐

with reservations

☐

not at all

Additional comments:

OPTIONAL: I would like a telephone conference to provide further information:

☐

Yes

Best time to call

Phone number to call

Ext.

TEACHER NAME

DATE

PLACEMENT INFORMATION

This information must be completed before the form is returned. Please circulate to appropriate faculty.

ENGLISH

Given the applicant's academic ability, writing skills, self-motivation, and work ethic, this student would be most successful in:

☐ an advanced program ☐ a standard program ☐ a program that is below grade level ☐ other

Comments

Name of current English teacher E-mail

Current English grade

MATHEMATICS

Name of mathematics course completed by the end of this school year

Current mathematics text and publisher

What next course would you recommend for this student?

At what level?

☐ an advanced program ☐ a standard program ☐ a program that is below grade level ☐ other

Comments

Name of current mathematics teacher E-mail

Current mathematics grade

INTERNATIONAL LANGUAGE

Does the student speak a language other than English at home? ☐ Yes Which language?

Has the applicant studied an international language? ☐ Yes Which language?

Which grade levels? (check all that apply) 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ How many hours per week does current class meet?

Current language text and publisher

What next course would you recommend for this student?

Comments

Name of current language teacher E-mail

Current international language grade