**Santiago Christian School**

**2014-15**

**Teacher Assessment- ECE-1st grade**

**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applying for Grade: \_\_\_\_\_\_\_\_**

The above named student has applied for admissions to Santiago Christian School. Please complete the form below and return it directly to the school by mail or fax. Check one rating for each area. Thank you for your assistance.

 If you wish to discuss this student personally rather than completing this form, please check here, sign this form and note your telephone number, and the principal will contact you.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Areas to Evaluate** | **Poor** | **Average** | **Good** | **Excellent** |
| Cognitive Development |  |  |  |  |
| Language and Literacy Development |  |  |  |  |
| Motor Skills Development |  |  |  |  |
| Motivation |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Social/Emotional Development** | **Never** | **Sometimes** | **Always** |
| Establishes and maintains relationships |  |  |  |
| Develops compassion for others |  |  |  |
| Manages strong emotions and their expression in a constructive manner |  |  |  |
| Controls one’s own behavior |  |  |  |
| Is able to enter a group successfully |  |  |  |
| Is able to engage in and stay with an activity for a reasonable amount of time with minimal adult support |  |  |  |
| Shows disruptive behavior |  |  |  |
| Shows aggressive behavior |  |  |  |
| Shows appropriate behavior for his/her age |  |  |  |
| Participates in class activities |  |  |  |
| Follows rules and procedures |  |  |  |
| Respects authority |  |  |  |

1. How long have you known this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does the student have significant limitations (physical, social or emotional)? Yes No

 If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Is the student in good standing and eligible to return next year? Yes No

 If no, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Has there been a need for administrative involvement in disciplinary action with this student? Yes No

 If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How would you rate the parent(s) involvement?
* No communication with them
* Disinterested
* Rarely supportive
* Usually supportive
* Very supportive

Please write or type a brief description of the student’s academic and behavioral abilities and performance.

Print your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return to:

Sonia Burnett, Admissions

809-570-6145 (fax)

admissions@scs.edu.do