

Association of Independent Schools in New England

STUDENT EVALUATION

For candidates to nursery, kindergarten, and grade one

Name of Student _____ Birthdate _____ Application for _____

Days per week enrolled _____ Hours per day _____ Size of group _____ Age range _____

To the teacher or school director: We appreciate your cooperation in completing this form. It provides one way of getting to know the child and is reviewed with the full awareness that young children are constantly changing and developing. Please note that we place particular value on your observations of classroom behavior and your descriptive comments in each area. This evaluation will be kept in strict confidence and used solely to help inform a thoughtful admission decision.

SOCIAL/EMOTIONAL DEVELOPMENT

	Exhibits strength	Age appropriate	Needs development
Can be a friend			
Is supportive of peers			
Is comfortable with adults			
Plays alone happily			
Cooperates in play			
Shares well			

	Exhibits strength	Age appropriate	Needs development
Initiates play activities			
Is imaginative			
Has the capacity to lead			
Has the capacity to follow			
Uses materials purposefully			
Exhibits appropriate humor			

DESCRIPTIVE COMMENTS:

COGNITIVE DEVELOPMENT

	Exhibits strength	Age appropriate	Needs development
Is attentive			
Listens in a group			
Contributes to group discussion			
Follows directions			
Works cooperatively			
Completes tasks			
Demonstrates ability to focus on one task			
Respects classroom routines			
Expresses ideas well			

	Exhibits strength	Age appropriate	Needs development
Moves easily from one activity to another			
Responds positively to constructive criticism			
Is curious			
Is willing to try new activities			
Is a self-starter			
Enjoys new challenges			
Exhibits problem-solving abilities			

DESCRIPTIVE COMMENTS:

PHYSICAL DEVELOPMENT

	Exhibits strength	Age appropriate	Needs development
Small muscle control and coordination			
Large muscle control and coordination			
Speech development (articulation)			

Please identify and describe any special needs, including auditory and visual development.

PARENT AND FAMILY INFORMATION

Please comment on parent cooperation and support for the child's school experience.

FOR APPLICANTS TO GRADE ONE ONLY

Describe beginning literacy or reading/writing skills:

Describe beginning math skills:

FOR ALL APPLICANTS: We encourage any other information which you think would be helpful. Include comments concerning strengths, weaknesses, or any special needs or concerns of this child and/or family. You may wish to use a separate sheet of paper.

Name _____ Date _____ Phone _____

School/Address _____

I have known this child for _____ years _____ months. My relationship has been that of _____.