



Student Evaluation Form

Pre-Kindergarten, Kindergarten, and First Grade

Please submit this form to your child's current teacher with a stamped, addressed envelope to East Lake Academy or the teacher may e-mail this confidential report to admissions@eastlakeacademy.org, c/o Director of Admissions.

Date: _____

Student Name: _____ Current Grade: _____

I give _____ my permission to answer the following questionnaire with regard to my child.

Parent's Signature

School Currently/Formerly Attending:

School Name

Street Address

City/State/Zip

School Telephone Number

TO: PRINCIPAL or TEACHER

The student named above has applied for admission into the _____ grade at East Lake Academy for the academic year _____. Your help is requested in supplying as much of the information below as possible so that we can better meet the needs of this student.

Length of time at this school: _____

Does student have a satisfactory attendance record? _____ Yes _____ No

I. Please grade the following areas with a check mark:

	Excellent	Good	Average	Poor
<u>READINESS:</u>				
Attention Span	_____	_____	_____	_____
Comprehension	_____	_____	_____	_____
(Understands school vocabulary)				
Retains Information	_____	_____	_____	_____
(Memory)				
Follow Directions	_____	_____	_____	_____
(Completes work with normal amount of help)				
Oral Expression	_____	_____	_____	_____
(Communicates clearly and distinctly)				
Gross Motor Development	_____	_____	_____	_____
Fine Motor Development				
Writing	_____	_____	_____	_____
Coloring (crayons)	_____	_____	_____	_____
Cutting	_____	_____	_____	_____
<u>BEHAVIORIAL:</u>				
General Attitude toward School	_____	_____	_____	_____
Classroom Conduct	_____	_____	_____	_____
Effort and Cooperation	_____	_____	_____	_____
Ability to Cope with Stress	_____	_____	_____	_____
(Frustration)				
Ability to Wait His/Her Turn	_____	_____	_____	_____
Relationship with Teacher	_____	_____	_____	_____

SOCIAL:

	Excellent	Good	Average	Poor
Relationship with Peers	_____	_____	_____	_____
Ability to be Part of a	_____	_____	_____	_____
Group Activity without Adult Assistance				
Plays with Others in	_____	_____	_____	_____
Co-operative Play				

II. Rate the applicant on the following:

	(1) Above Average	(2) Average	(3) Below Average
Academic Progress	_____	_____	_____
Behavioral Development	_____	_____	_____
Social Maturity/	_____	_____	_____
Emotional Development			

III. Check One:

	All	Some	None
Applicant recognizes letters	_____	_____	_____
Applicant writes letters	_____	_____	_____
Applicant knows letter sounds	_____	_____	_____
Applicant knows basic colors	_____	_____	_____
Applicant knows basic shapes	_____	_____	_____
Applicant recognizes numbers to: _____			
Applicant writes numbers to: _____			

IV. Reading Series and present level of child – Please Explain: Is the applicant reading? _____

V. Math Series and present level of child – Please Explain:

VI. Please describe any disabilities (physical, emotional, mental, language barriers, family situations), **which affect this student's progress:**

VII. Discipline – Please Comment:

VIII. Previous educational/psychological tests administered to applicant. Describe and enclose copies (if possible).

Has the student ever been so advised to participate in such a program? ____ Yes ____ No

Any other comments:

Thank you for your time and effort you have taken in completing this evaluation. Your recommendations do have a bearing on our decision. Please sign and send this completed form, transcript, and school to East Lake Academy. Please indicate the best date and time for us to contact the applicant's teacher.

_____ <i>Signature of Teacher</i>	_____ <i>Date</i>	_____ <i>Best Date/Time To Be Contacted</i>	_____ <i>Telephone Number</i>
_____ <i>Signature of Principal</i>	_____ <i>Date</i>	_____ <i>Best Date/Time To Be Contacted</i>	_____ <i>Telephone Number</i>

Has this family completed all of their financial commitments? ____ Yes ____ No

Has this family met their financial commitments in timely manner? ____ Yes ____ No

Confidential Report