



# Confidential Teacher Evaluation Form

Second Grade through Sixth Grade

Kay and Robert Schattner Center  
6045 16<sup>th</sup> St. NW, Washington, DC 20011  
Phone: 202-291-5737, ext. 103 Fax: 202-291-9750  
E-mail: admissions@jpds.org

Name of Student \_\_\_\_\_ Application for grade \_\_\_\_\_  
Name of person completing evaluation form \_\_\_\_\_  
I have known this student \_\_\_\_\_ years/months.  
Subject or name of class that I teach \_\_\_\_\_ School \_\_\_\_\_  
Grade of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**To the Teacher:**

We appreciate your cooperation and candidacy in completing this form. Teacher evaluations are confidential and do not become part of the student's permanent file. This form provides one way of getting to know the student and is reviewed with the full awareness that children are constantly growing, changing, and developing.

What are the first words that come to mind to describe this student?

**Character and Personality Traits**

Please rate the candidate in the following areas.

**Conduct**  Outstanding in every respect  Usually good  Occasional misconduct  Frequent disruption  
Comments \_\_\_\_\_

**Leadership**  Much  Some  Little  
Comments \_\_\_\_\_

**Emotional Maturity/Stability**  Very mature  Average  Somewhat immature  Very immature  
Comments \_\_\_\_\_

**Social relationship with peers/ Consideration for others**  Healthy cooperative relationships  
 Occasional minor problems  Relates poorly  
Comments \_\_\_\_\_

**Self Confidence**  Healthy self image  Needs some support  Needs much reassurance  
Comments \_\_\_\_\_

**Integrity**  Very trustworthy  Usually trustworthy  Not trustworthy  
Comments \_\_\_\_\_

**Sense of Humor**  Highly developed  Appropriate  Poorly developed  
Comments \_\_\_\_\_

**Interaction with teachers/adults**  Is comfortable  Is dependent  Avoids contact  
Comments \_\_\_\_\_

**Sense of responsibility**  Very responsible  Usually responsible  Somewhat responsible  
Comments \_\_\_\_\_

**Academic Traits**

	Excellent	Good	Average	Below Average	Poor	No Basis for Judgment	Comments
Reading ability							
Math ability							
Hebrew skills							
Academic potential							
Academic achievement							
Self-motivation							
Study habits/ organization of time and materials							
Intellectual curiosity							
Attention span							
Commitment to homework							
Ability to follow directions							
Ability to work independently							
Ability to work in a group							
Ability to express ideas orally							
Ability to express ideas in writing							
Attendance							

Parents are (check one)  very involved with school activities  somewhat involved  rarely involved  not involved

Parents are  very cooperative  usually cooperative  somewhat cooperative  uncooperative

**Please answer completely the following, using additional paper as necessary.**

Please describe any outstanding abilities or deficiencies not covered by the above categories.

Please describe any independent evaluations for emotional, academic, or physical reasons that you are aware of that have been recommended or have been obtained.

Please describe any signs of learning disabilities that you have observed.

Please describe any special accommodations that are provided for the student.

We welcome any other information that you think would be helpful. You may use a separate sheet of paper for further comments in any category.

If you would like to speak confidentially about this student, please feel free to call Sindy Udell, Director of Admission, 202-291-5737, ext. 103 or contact her via e-mail at [sindyu@jpds.org](mailto:sindyu@jpds.org) or provide your phone number, days, and hours that are best to reach you. \_\_\_\_\_

Signature

Telephone

**Please return this form directly to:** JPDS-NC Admission Office, Kay and Robert Schattner Center, 6045 16th Street, NW, Washington, DC 20011.