

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:

<input type="text"/> <small>Name</small>	<input type="text"/> <small>Phone (home)</small>	<input type="text"/> <small>Phone (work /cell)</small>	<input type="text"/> <small>E-mail</small>
<input type="text"/> <small>Name</small>	<input type="text"/> <small>Phone (home)</small>	<input type="text"/> <small>Phone (work /cell)</small>	<input type="text"/> <small>E-mail</small>

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
Director of Admissions
12911 39th Ave. SE, Everett, WA 98208-6159
(425) 332-3036 / (425) 385-2875 FAX
www.am-hs.org admissions@am-hs.org

Holy Names Academy
Vice Principal of Academics
728 21st Ave. E, Seattle, WA 98112-4058
(206) 323-4272 / (206) 323-5254 FAX
www.holynames-sea.org admissions@holynames-sea.org

Bishop Blanchet High School
Director of Admissions
8200 Wallingford Ave. N, Seattle, WA 98103-4599
(206) 527-7741 / (206) 527-7712 FAX
www.bishopblanchet.org mpierce@bishopblanchet.org

John F. Kennedy Catholic High School
Director of Admissions
140 S 140th St., Burien, WA 98168-3496
(206) 246-0500 / (206) 242-0831 FAX
www.kennedyhs.org admissions@kennedyhs.org

Eastside Catholic School
Director of Admissions
232 228th Ave. SE, Sammamish, WA 98074-7207
(425) 295-3014 / (425) 392-5160 FAX
www.eastsidecatholic.org jward@eastsidecatholic.org

O'Dea High School
Director of Admissions
802 Terry Ave., Seattle, WA 98104-1294
(206) 622-1308 / (206) 340-4110 FAX
www.odea.org kpatterson@odea.org

Forest Ridge School of the Sacred Heart
Director of Admissions
4800 139th Ave. SE, Bellevue, WA 98006-3099
(425) 641-0700 / (425) 643-3881 FAX
www.forestridge.org admissions@forestridge.org

Seattle Preparatory School
Director of Admissions
2400 11th Ave. E, Seattle, WA 98102-4098
(206) 577-2146 / (206) 577-2198 FAX
www.seaprep.org aalokolaro@seaprep.org

Student name

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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Demonstrates higher-level thinking skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works to potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Participates actively in class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works well independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works well with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Completes work on time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Manages time effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is punctual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Responds appropriately to criticism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Takes responsibility for actions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Cooperates with teachers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Respects the learning environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Relates well to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Treats others with respect and dignity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Demonstrates integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Demonstrates leadership qualities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Participates in school activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

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

Best time to reach English teacher by phone Phone Ext.

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

Best time to reach mathematics teacher by phone Phone Ext.

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

Best time to reach language teacher by phone Phone Ext.