

READING TEACHER'S STUDENT EVALUATION

(CONFIDENTIAL)

Applicant's Name: _____

Applying for GRADE: _____

Parent/Guardian: I waive both my right of access and that of my child to this evaluation form. I ask that the teacher complete this evaluation, sign the envelope flap and mail it directly to Fellowship Christian Academy.

Signature of Parent or Guardian

Date

To the Teacher: Please assess the above named student as compared with peers at the current school by completing both sides of the Student Evaluation Form.

Academic Performance in:	Superior	Good	Average	Below Average	Poor	Not Observed
LANGUAGE ARTS						
Reading Skills						
Comprehension						
Word Attack						
Vocabulary						
Writing Skills						
Sentence Writing						
Paragraph Writing						
Narrative Writing						
Expository Writing						
Listening Skills						
Attentive Listening						
Auditory Comprehension						
Speaking Skills						
Articulation						
Informal Conversation						
Normal Speeches						
STUDY HABITS / SKILLS						
Degree of effort						
Ability to work independently						
Consistency of completion of work on time						
Attention Span						
Organization and care of material						
PERSONAL CHARACTERISTICS						
Peer relationships						
Attitude toward faculty/staff						
Assumption of responsibility						
Citizenship/Conduct						

READING TEACHER'S STUDENT EVALUATION (CONTINUED)

(CONFIDENTIAL)

Please comment on the following:

1. Academic qualities (kindness, originality, creativity, reflectivity): _____

2. Social and emotional maturity compared with others of the same chronological age: _____

3. Special needs/Disabilities: _____

4. Areas of strength: _____

5. Areas of weakness: _____

6. Involvement in extra-curricular activities: _____

7. Parental Support and School Involvement: _____

8. Additional Comments: _____

I recommend

I do not recommend

I recommend with reservations

Teacher's Name: _____ Position: _____ Phone: _____

Signature of Teacher

Date

RETURN TO:

FELLOWSHIP CHRISTIAN ACADEMY

Director of Enrollment

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