TO BE COMPLETED BY SCHOOL DIRECTOR, GUIDANCE COUNSELOR, OR TEACHER

Thank you for completing both sides of this evaluation, which is a critical part of our decision-making process. The answers to the questions on this page are extremely important to us; we value your thoughtful and honest assessments. All information you provide is appreciated and will be reviewed only by the Admissions Committee.

NI	
Name of	Student:

Applicant to Grade_

I have known this candidate for____ months/years (circle one). My relationship has been that of___

CHARACTER SUMMARY: Please check the box to the left of each word that best describes the student.

□inquisitive	easily discouraged	□honest	□social	□over-protected	□self-centered
□articulate	□manipulative	□influential	□well-liked	□passive	□perfectionist
□follower	□responsible	□cheerful	□shy	□aggressive	□organized
∏disobedient	□self-disciplined	☐thoughtful	□irritable	□vivacious	Caring

ACADEMIC QUALIFICATIONS: Please feel free to place your check anywhere within each column.

	Above Average	Age Appropriate	Making Progress	General Academic Comments
General Ability				
Self-motivation				
Curiosity				
Oral Communication				
Reading Fluency				
Writing Ability				
Attention Span				
Organizational Skills				
Accepts Direction				
Works Cooperatively				
Works Independently				
Follows Directions				



PERSONAL QUALITIES: Please feel free to place your check anywhere within each column.						
	Above Average/ Usually	Age Appropriate	Making Progress	General Personal Comments		
Empathetic						
Shares Easily						
Makes Wise Decisions						
Self-Confident						
Can Be a Leader						
Owns Up to Mistakes						
Can Be a Friend						

In your opinion, is this student performing up to his or her potential and in what areas does he or she most need to improve?

Are you aware of any standardized achievement or psychological tests the applicant may have had? Yes___ No___ If yes, please specify:

Please share any further information that would help us most effectively teach this child (i.e. learning style, classroom accommodations, special talents, interests, etc.).

If the applicant were admitted to Seneca Academy and left your school, your school would be...

__ largely unchanged because he or she fit in adequately with your student body.

____ suffering a major loss because he or she is an excellent addition to the school.

_ losing a student who brings significant challenges to school each day.

__losing a student who adds in some areas but detracts in others.

How have the applicant's parents impacted your school? Our school has...

____ been lucky because the parents are supportive and interested.

_ been no better off because the parents can be meddlesome or have a lack of perspective.

____ been unchanged because they are neither strongly positive or negative.

Have the parents satisfied all financial obligations to your school? Yes___No___

May we contact you with further guestions? Yes___ No___ Date Person completing report _ Signature Print Name Name of School/Institution _____ Address _____

Phone number______ Email _____

PLEASE RETURN DIRECTLY TO:

Seneca Academy Attention: Admissions Director 15601 Germantown Road Darnestown, MD 20874