



Mathematics Teacher Evaluation

5th Grade through 12th Grade Applicants Only

Applicant's Full Name: _____
First Middle Last Preferred Name

Applicant's Current School: _____ Current Grade: _____

Applicant Family:

Please submit this form to your current teacher, allowing time for completion and return.

I waive my right of access and that of my child to this teacher evaluation form. _____
Parent Signature

Current Teacher:

The above student is applying for admission to Trinity School of Texas. As part of the admission process, please assess the student as compared with his or her peers. We appreciate your time and effort in completing this evaluation. Be assured all of the information you provide will be held in strict confidence. Please mail this form directly to the admission office at Trinity School of Texas, 215 N. Teague Street, Longview, Texas 75601.

	Below Expectations 1	2	3	4	Exceptional 5	No Basis
PERSONAL CHARACTERISTICS						
Peer Relations						
Assumption of Responsibility						
Citizenship/Conduct						
Management of Conflict						
Emotional Maturity						
SCHOOL PERFORMANCE						
Facts/Computation Skills						
Understanding Concepts						
Problem Solving						
Predictions of Success at Next Grade Level						
Academic Achievement						
Motivation						
Would you recommend this child for an Honors course?	YES	NO				
Has outside help been recommended?	YES	NO				
Has outside help been given?	YES	NO				
HEALTH AND ATTENDANCE RECORDS						
General Health						
Attendance						
Tardiness						
STUDY HABITS						
Ability to Work Independently						
Ability to Work with Others						
Pattern of Completing Work on Time						
Attention Span						
Organization of Materials						
Work Ethic						

(over)

Please choose from the following recommendations:

- Highly Recommend
- Recommend
- Recommend with reservations because _____
- Do not recommend because _____

Please comment on the following: *Attach a separate sheet, if necessary.*

1. Applicant's qualities of mind (*keenness, originality, imagination, curiosity*):

2. Applicant's social and/or emotional development as compared to others of the same chronological age:

3. Applicant's strengths:

4. Applicant's weaknesses:

5. Disabilities or special needs (including amount of teacher time required):

6. Parental expectations, support, and attitude toward applicant and school:

7. Additional comments (*please attach additional sheet if necessary*):

Please PRINT the following:

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<i>Name</i>	<i>Position</i>	<i>Date</i>	
<hr/>			
<i>School</i>			
<hr/>			
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<hr/>			
<i>Email Address</i>		<i>Telephone</i>	