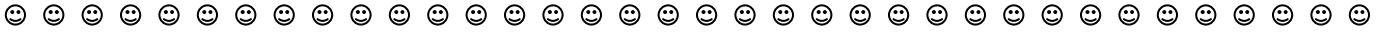




*Brent*

International School Subic

**Confidential Teacher  
Evaluation Form**  
Kindergarten and Grade 1



\_\_\_\_\_  
*Applicant's Name*

\_\_\_\_\_  
*Current grade*

\_\_\_\_\_  
*Applying to grade*

**To the Teacher or School Head:** We appreciate your comment in completing this confidential form. Information about this child will be valuable in assisting us to evaluate his/her application for admission to our school.

*Please check here if you wish to discuss this applicant by phone*

\_\_\_\_\_  
*Person completing this form*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*School Name*

\_\_\_\_\_  
*Country*

\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Email*

\_\_\_\_\_  
*How long have you known this student?*

\_\_\_\_\_  
*Date*

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

**Please check appropriate boxes.**

**Social Development**

	Usually	Sometimes	Seldom
Shares well			
Can be a friend			
Is Imaginative			
Plays alone happily			
Cooperates at play			
Is supportive of peers			
Initiates play activities			
Has the capacity to lead			
Has the capacity to follow			
Uses materials purposely			
Seeks help when needed			
Is comfortable with adults			
Is mature for age / grade			
Exhibits good sense of humor			
Demonstrates self-control in class			
Demonstrates self-control on playground			

**What frustrates this child?**

**Physical Development**

	Outstanding	Age Appropriate	Needs Development
Speech Development			
Small muscle control and development			
Large muscle control and development			

**Pre-Academic Skill Development**

	<b>Outstanding</b>	<b>Age Appropriate</b>	<b>Needs Development</b>
Is curious			
Is attentive			
Is a self-starter			
Completes tasks			
Follows directions			
Listens in a group			
Expresses ideas well			
Works cooperatively			
Enjoys new challenges			
Respects classroom routines			
Is willing to try new activities			
Exhibits problem solving ability			
Contributes to group discussions			
Demonstrates ability to focus on one task			

*If applicable, please describe the child's development of:*

**Beginning reading skills:**

**Beginning math skills:**

**Personal Characteristics:** Please describe the child (personality, maturity, confidence, humor and independence). We welcome any information, which you think would be helpful.

Have you observed any signs of learning disabilities?     Yes\*     No     Don't Know

Does student receive any special accommodations?     Yes\*     No     Don't Know

\*If yes, please explain (Please use a separate sheet of paper for further comments in any category, if needed.)

**How strongly do you recommend this student?**

Enthusiastically     Strongly     Fairly Strongly     Without Enthusiasm     Not Recommended

**Parent involvement:**     Much     Usually     Rarely     Not Involved     Don't Know

**Parent cooperation:**     Very Cooperative     Usually Cooperative     Not Cooperative

**Thank you** for your assistance. Please return the completed form to the student in a sealed envelope, or mail directly at the intended school of enrollment:

**Brent International School Subic**                      *Attn: Admissions Office*

**Subic Campus:**                      Bldg. 6601 Binictican Drive, Subic Bay Freeport Zone, Zambales 2222 Philippines  
 + 63 47 252-6871 to 73                      [admissions@brentsubic.edu.ph](mailto:admissions@brentsubic.edu.ph)