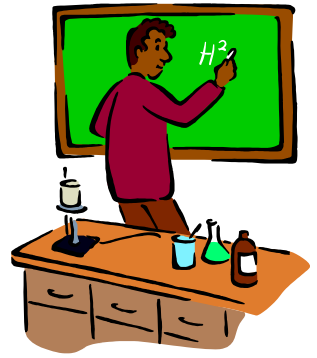


Teacher Evaluation Form for College Applicant



Recommending Teacher: \_\_\_\_\_

Please Return to: \_\_\_\_\_ by \_\_\_\_\_

Counselor \_\_\_\_\_ Date \_\_\_\_\_

Student: \_\_\_\_\_ Subject Taught: \_\_\_\_\_

Dear Teachers,

Your help is requested in evaluating the above named student. Counselors need as much accurate, specific, descriptive information as possible so that we can give a complete picture of each student to college admissions staff. I particularly need comments that may be quoted: anecdotal, those that specifically address academic performance, special accomplishments, potential for growth, leadership, character, etc. This form is NOT sent to colleges, but is kept confidential and is only used by the counselors in filling out our portion of the college application process. Thank you for your time and effort!

PARTICIPATION IN DISCUSSION

- active participation/initiates discussion
- average participation
- low participation
- other \_\_\_\_\_

DEPTH OF UNDERSTANDING

- excellent insight
- good insight
- some insight/fluctuates
- other \_\_\_\_\_

INVOLVEMENT IN CLASSROOM

ACTIVITIES

- highly involved
- frequently involved
- seldom involved
- other \_\_\_\_\_

PERSONAL RESPONSIBILITY

- always accepts fully
- usually accepts fully
- sometimes accepts
- other \_\_\_\_\_

CRITICAL & QUESTIONING ATTITUDE

- often challenges, questions, probes
- occasionally questions, probes
- rarely questions
- other \_\_\_\_\_

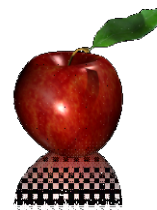
CONSIDERATION OF OTHERS

- always considerate of other
- usually considerate
- sometimes considerate
- other \_\_\_\_\_

List 3 adjectives which first come to mind when you think of this student:

\_\_\_\_\_

List one major contribution this student has made in your class/es. Be specific as possible:



Please check qualities for which student is especially respected/admired:

- |   |   |
|---|---|
| <input type="checkbox"/> Responsibility               | <input type="checkbox"/> Interest in other students |
| <input type="checkbox"/> Superiority in studies       | <input type="checkbox"/> Leadership in activities   |
| <input type="checkbox"/> Accomplishment in activities | <input type="checkbox"/> Personality/manners        |
| <input type="checkbox"/> Success in athletics         | <input type="checkbox"/> Other _____                |

\*General Ratings: In making these ratings, please keep in mind that they are used to compare this student with his or her class. Please check the single most appropriate box.

	Average or Below	Good or Above Average	Excellent or top 10% this year	Outstanding top 5% this year	One of the best I have ever seen	No basis for Judgement
Academic Motivation						
Academic Creativity						
Academic Self-Discipline						
Academic Growth Potential						
Leadership						
Self-Confidence						
Warmth of Personality						
Sense of Humor						
Concern for Others						
Energy						
Emotional Maturity						
Personal Initiative						
Reaction to Setbacks						
Respect Accorded to Faculty						

Please use space below for additional comments. Feel free to use additional paper. THANK YOU!

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_