



Teacher's Evaluation: English Grades 6-12

Dear _____

One of your students, _____, is applying to enter grade _____ at St. Paul Academy and Summit School. Consideration of evaluations from current academic teachers is a major part of our admission process. The applicant is required to deliver this form to you, along with a return envelope. Evaluations are confidential. Only the Admission Committee reads the evaluations; they do not become part of the student's permanent file, and they are not shared with the student or the student's parents. If you wish to add further comments, please attach a separate letter. Thank you in advance for the time and consideration you put into this evaluation. Please mail the completed form to the address below.

Admission Office
St. Paul Academy and Summit School
1712 Randolph Avenue
St. Paul, MN 55105
(651) 698-2451

The following phrases describe characteristics a student might exhibit in a school setting. For each item, please check the box you consider most appropriate to this student.

	Always	Usually	Sometimes	Seldom	Never
Exhibits strong academic ability	<input type="checkbox"/>				
Is motivated	<input type="checkbox"/>				
Takes initiative	<input type="checkbox"/>				
Participates in discussions	<input type="checkbox"/>				
Exercises positive leadership	<input type="checkbox"/>				
Shows concern for others	<input type="checkbox"/>				
Accepts responsibility	<input type="checkbox"/>				
Listens attentively	<input type="checkbox"/>				
Expresses own ideas and feelings	<input type="checkbox"/>				
Is well-organized	<input type="checkbox"/>				
Follows directions	<input type="checkbox"/>				
Is creative	<input type="checkbox"/>				
Selects activities independently	<input type="checkbox"/>				
Demonstrates emotional stability	<input type="checkbox"/>				
Meets deadlines	<input type="checkbox"/>				

Please comment on the following:

Academic strengths _____

Academic challenges _____

Work habits _____

School citizenship, respectful behavior, following school expectations _____

Your interactions with the student's parents _____

How long and in what capacity have you known this student? Please include subjects taught.

Other information

Briefly describe your course. It is especially helpful to know which texts and books are being read.

How accurately does the student read and understand what he/she has read?

Skills

Writing ability

Reading ability

Grammar

Vocabulary

Verbal skills

Overall rating

	Truly outstanding	Excellent	Above Average	Average	Below Average
For academic promise	<input type="checkbox"/>				
For personal promise	<input type="checkbox"/>				

Additional comments

Please add any additional comments that would give us a more complete picture of the applicant.

Your name *(please print)*

 Position at school

School name

School address

 City

 State

 Zip

Signature

 Date

May we contact you for further information? Yes No

 Phone/e-mail

Please return this form to: Admission Office, St. Paul Academy and Summit School, 1712 Randolph Avenue, St. Paul, MN 55105
Thank you again for your attention on behalf of this student.