



Applicant's Name _____ Applying for Grade _____

Counselor or Administrator Evaluation

Name of person completing this report: _____

Name of school: _____

1. I have known the above applicant for _____ as his/her _____

2. This report is based on: _____ Personal observation and contact with student _____ Teacher Comments _____
Other counselor's observations _____ Records _____ Other (explain) _____

3. The student has been sent to the office for disciplinary reasons: _____ Often _____ Seldom _____ Never

Please describe problem(s) _____

4. This student has been suspended _____ times. Reason(s) _____

5. Has the applicant been expelled or dismissed from school for academic or disciplinary reasons and therefore not eligible to return? _____ Yes _____ No Explain: _____

6. Do you have any reason to doubt this student's academic integrity? _____ Yes _____ No

7. The applicant's attendance has been: _____ Excellent _____ Good _____ Poor

8. The applicant's parents can best be described as: (Circle as many as apply)

Involved Cooperative Difficult Uninvolved Tends to blame school for student's problems

9. Does the applicant have any significant limitations (physical, social/emotional, academic/learning disabilities)

Please describe: _____

