



# Bridgeview Montessori School

## *Student Evaluation from Current Teacher*

*For students entering grades one through six  
(Please Print)*

**Section I:**

Student's Name: \_\_\_\_\_

Current Grade \_\_\_\_\_

I have known this candidate for \_\_\_\_\_ years \_\_\_\_\_ months.      Number of students in current class \_\_\_\_\_

What are the first words that come to mind to describe this candidate: \_\_\_\_\_

We appreciate your cooperation in completing this form. It provides one way of getting to know the child and is reviewed with the full awareness that children are constantly changing and developing. Please note that we place particular value on your observations of classroom behavior and your descriptive comments in each area. This evaluation will be kept in strict confidence. **This evaluation will be reviewed only by the admissions committee and will not become part of the student's permanent record.** Your insights will be used solely to help inform a thoughtful admissions decision which will result in the best placement for each child. Please email this form to slawson@bridgeviewmontessori.org or mail directly to Suzanne Lawson, P.O. Box 270, Sagamore, MA 02561.

**Section II: Social/Emotional Development (Please place an X at the point in the line that best represents this student):**

Demonstrates responsibility	_____	Comment:
	seldom _____ consistently	
Consideration of others	_____	Comment:
	not empathetic _____ very considerate	
Social Relationship with peers	_____	Comment:
	relates poorly _____ connected & respected	
Leadership ability	_____	Comment:
	poor _____ excellent	
Emotional Maturity	_____	Comment:
	immature _____ very mature	
Self-confidence	_____	Comment:
	poor self-image _____ healthy self-image	
Sense of humor	_____	Comment:
	poorly developed _____ highly developed	
Self control	_____	Comment:
	frequently disruptive _____ excellent	
Interaction with teachers/adults	_____	Comment:
	avoids contact _____ healthy/comfortable	

**Section III: Academic Development**

**Classroom Characteristics (Please place an X at the point in the line that best represents this student):**

Listens attentively	_____	NA	Comment:
	seldom _____ consistently		
Follows directions	_____	NA	Comment:
	seldom _____ consistently		
Works well independently	_____	NA	Comment:
	seldom _____ consistently		
Organizes self / materials	_____	NA	Comment:
	seldom _____ consistently		
Works well in small groups	_____	NA	Comment:
	seldom _____ consistently		
Demonstrates creativity	_____	NA	Comment:
	seldom _____ consistently		
Seeks help when needed	_____	NA	Comment:
	seldom _____ consistently		
Responds positively to suggestions/requests	_____	NA	Comment:
	seldom _____ consistently		
Moves easily from one activity or space to another	_____	NA	Comment:
	seldom _____ consistently		
Completes homework on time	_____	NA	Comment:
	seldom _____ consistently		

**Material (Please ✓ best descriptor):**

<b>Language Arts</b>	Above grade level	At grade level	Below grade level	NA	<b>Comment:</b>
Reading decoding/speed					
Reading comprehension					
Vocabulary					
Spelling					
Writing: Organization					
Writing: Topic development					
Handwriting					
<b>Mathematics</b>					
Problem solving skills					
Recognizes patterns in numbers					
Understands place value					
Computation skills					
Spatial problem-solving skills					
<b>Enrichments</b>					
Art					
Music					
Science					
Physical Fitness					
Social Studies					
<b>General</b>					
Level of motivation					
Problem-solving skills					
Understanding of abstract concepts					
Willingness to take risks					

**Section IV: Parent(s) and Family (Please ✓ best descriptor):**

	Consistently	Usually	Sometimes	Rarely	<b>Comment:</b>
Supportive of child's experience					
Supportive of your school's programs/routines					
Supportive of you as a teacher					
Responsive to suggestions/guidance					
Realistic in setting educational goals					

To your knowledge, is the parent's perception of the child compatible with the school's understanding of the child? Explain.

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**Section V: Closing:**

Please comment on this child's ability to meet the expectations of your school. Have you adjusted your program to accommodate the needs or abilities of this child? If you have, what accommodations are most successful? What has not worked as well?

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Does this child have a diagnosed learning difference? \_\_\_\_\_

Have you or your school ever suggested assessment/testing for a learning difference? If yes, please explain briefly.

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Please include any other information that you think would be helpful as we learn more about this student and his/her potential in being successful at Bridgeview Montessori School. Thank you.

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Your name: \_\_\_\_\_ Date: \_\_\_\_\_ School Telephone: \_\_\_\_\_

School: \_\_\_\_\_ Your email: \_\_\_\_\_