

Teacher Comments

Name of student _____ Applicant to grade _____

Teacher's name _____ Position _____

School _____

Address _____ City _____ State _____ Zip _____

The student named above is applying to Grace Lutheran School in River Forest, Illinois. A full report from the applicant's present school is necessary if he or she is to be given consideration for admission. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights.

How long have you known the applicant? _____ In what capacity? _____

Student/teacher ratio in your classroom _____

What three words come to mind to describe this student?

1. _____ 2. _____ 3. _____

Personal Qualities

Skills	E	G	A	BA	Comments
Honesty/integrity					
Leadership					
Self-esteem					
Receptivity to others' ideas					
Peer compatibility					
Relationship with teacher(s)					
Reaction to setbacks					
Responsibility					

E=Excellent G=Good A=Average BA=Below Average

Academic Development

Skills	E	G	A	BA	Comments
Intellectual curiosity					
Initiative					
Motivation					
Academic performance					
Academic ability					
Ability to reason abstractly					
Ability to think logically					
Stays on task					
Completes assignments promptly					
Works well independently					
Works well in a group					
Demonstrates effort					
Seeks help when needed					

E=Excellent G=Good A=Average BA=Below Average

Course Description

Title _____

Is this class at your school sectioned according to ability? ____ Yes ____ No

If yes, briefly explain how this course is sectioned and note the section placement of the applicant.

What text is used? _____

By June, we will have completed _____ of _____ chapters.

Please comment on noteworthy strengths of the student.

Is there additional information that would be helpful to us in our evaluation of this applicant?

Parent/School Relationship

Parents are an important part of our relationship with the student. Please share with us any thoughts you have regarding this applicant's family, including family members' involvement in your school. Please comment to the best of your knowledge.

Signature _____ Date _____

If we have additional questions, may we call you? _____

If yes, phone number _____ Most convenient time to call is _____

Again, thank you for your time and the helpful information you have provided.

Grace Lutheran School
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