

# The Winston School - English Teacher Evaluation

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Applicant's Name \_\_\_\_\_  
Last First Middle

Candidate for Grade \_\_\_\_\_ Present Grade \_\_\_\_\_

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**To The Parent:** Please sign and submit this form to your child's English teacher.

I waive my right of access and that of my child to this teacher evaluation form.

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## Parent/Guardian's Signature

**To The Teachers:** The student above is applying for admission to our school. As part of the admission process, please assess the student as compared with his/her peers. We appreciate your time and effort in completing this evaluation. Be assured that all of the information you provide will be held in strict confidence. Please keep the original and send copy(ies) to The Winston School, Office of Admission, 5707 Royal Lane, Dallas, TX 75229 or fax to 214-691-1509. Thank you.

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	Below Expectations					Exceptional	No Basis
<b>Personal characteristics</b> (Circle one)							
Peer relations	1	2	3	4	5	_____	
Assumption of responsibility	1	2	3	4	5	_____	
Citizenship/conduct	1	2	3	4	5	_____	
Management of conflict/criticism	1	2	3	4	5	_____	
Emotional maturity	1	2	3	4	5	_____	
<b>School Performance</b> (Circle one)							
Reading Skills	1	2	3	4	5	_____	
Writing Skills	1	2	3	4	5	_____	
Oral communication skills	1	2	3	4	5	_____	
Motivation	1	2	3	4	5	_____	
<b>Study Habits</b> (Circle one)							
Ability to work independently	1	2	3	4	5	_____	
Ability to work with others	1	2	3	4	5	_____	
Pattern of completing work on time	1	2	3	4	5	_____	
Attention span	1	2	3	4	5	_____	
Organization/care of materials	1	2	3	4	5	_____	
Work ethic	1	2	3	4	5	_____	
<b>Health and Attendance Record</b> (Circle one)							
General Health	1	2	3	4	5	_____	
Attendance	1	2	3	4	5	_____	
Tardiness	1	2	3	4	5	_____	

**Please select from one of the following Recommendations:**

- Highly recommend
- Recommend
- Recommend with reservation because \_\_\_\_\_
- Do not recommend because \_\_\_\_\_

(Over)

**English Teacher Evaluation (con't)**

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Please comment briefly on the following:

Applicant's qualities of mind (keenness, originality, curiosity):

Applicant's social and/or emotional development as compared with others of the same chronological age:

Applicant's strengths:

Applicant's weaknesses:

Disabilities or special needs (including amount of teacher time required):

Parental expectations, support and attitude toward applicant and school:

Additional comments (please attach additional sheet if necessary):

This student has been enrolled in his/her current school for \_\_\_\_\_ year(s). I have known him/her for \_\_\_\_\_ year(s).

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Please **print** the following:

Name	Position	Date
School	Address	Phone
City	State	Zip

**Mail directly to:**

Director of Admission  
The Winston School  
5707 Royal Lane  
Dallas, TX 75229 Fax: 214-691-1509