



St. John's- Ravenscourt School

RISE TO THE CHALLENGE

TEACHER EVALUATION FORM

Thank you for assisting with the admissions process for St. John's-Ravenscourt School.

The teacher evaluation form serves as an essential tool to assist us in determining the suitability of our program for each applicant. Your information provides us with insight into the applicant's behaviour, work ethic and academic skill level.

Section A should be filled out by the parent/guardian of the applicant and Section B should be completed by a principal, teacher or counsellor from the applicant's present school.

We ask that the school representative return the completed form directly to St. John's-Ravenscourt School:

St. John's-Ravenscourt School, Admissions

400 South Drive

Winnipeg, MB R3T 3K5

Tel: 204.477.2400 Fax: 204.477.2429

Email: admissions@sjr.mb.ca

***Please note:** If the student's current school will not complete this form, please provide a reference letter from an instructor, coach or tutor. This individual should not be a family member.*

Section A (to be completed by the parent/guardian)

Student's Name _____

Student's Street Address _____ / _____ / _____ / _____
City Province/State Postal Code/Zip

Student's Parent/Guardian Telephone _____ / _____
Email Address

School Name _____ / _____
Current Grade

Student's Street Address _____ / _____ / _____ / _____
City Province/State Postal Code/Zip

School's Telephone _____ / _____
School's Fax

Name of Parent or Legal Guardian _____ / _____ / _____
Signature Date

Section B (to be completed by the school principal, teacher or counsellor)

1. How long have you known the applicant? _____

2. In what capacity? _____

3. What are the first three words that come to mind to describe this student? _____

Section B continued...

4. Does this student have any diagnosed learning disabilities? (circle one) YES NO

If yes, please explain: _____

5. Has this student ever been a disciplinary problem? (circle one) YES NO

If yes, please explain: _____

6. Has this student ever been dismissed, suspended or placed on probation while at your school? (circle one) YES NO

If yes, please explain: _____

7. In relation to other students you have taught at this grade level, rate this applicant in the following areas by checking the appropriate box for each:

| | Outstanding | Above Average | Average | Below Average | Comments |
|---|-------------|---------------|---------|---------------|----------|
| Academic Achievement | | | | | |
| Academic Potential | | | | | |
| Class Participation | | | | | |
| Work Ethic | | | | | |
| Motivation | | | | | |
| Organization of time & Materials | | | | | |
| Intellectual Curiosity | | | | | |
| Creativity | | | | | |
| Sensitivity to Others | | | | | |
| Integrity | | | | | |
| Self-Esteem | | | | | |
| Sense of Humour | | | | | |
| Self Discipline | | | | | |
| Maturity | | | | | |
| Independence | | | | | |
| Peer Relationships | | | | | |
| Leadership Potential | | | | | |
| Responsibility for Own Actions | | | | | |
| Receptivity to Feedback | | | | | |
| Involvement in Co-curricular Activities | | | | | |

Thank you for taking the time to assist us.

_____/_____
Name Position

_____/_____
Signature Date