

KapKa Cooperative School

Teacher Evaluation Form for Children Applying to: Kindergarten



KapKa
Cooperative School
510 N. 49th St.
Seattle, WA 98103

Thank you in advance for supplying the requested information. Your input is crucial and appreciated. The information you submit is confidential, and will not be shared with parents, nor will it become part of the child's permanent school records. Please make your comments as detailed as possible.

Please return directly to: **KapKa Cooperative School, 510 N. 49th St, Seattle, WA 98103** by February 24, 2012.

Applicant's Name: _____ Present grade: _____

Current School or Program: _____ School Phone: _____

School Address: _____ School e-mail: _____

Teacher's Name: _____ Teacher's e-mail: _____

Teacher's Phone: _____ How long student in school/program? _____

How long have you known this child and in what capacity? _____

Applicant Attends: ____ days per week ____ hours per day

SOCIAL DEVELOPMENT	Area of Strength	Appropriate for Age	Progressing toward Age Appropriate	Area of Concern	Comments
Shows empathy and respect toward others					
Plays alone happily					
Cooperates at play					
Shares well without prompting					
Initiates play activities					
Demonstrates ability to lead					
Demonstrates ability to follow					
Is imaginative					
Demonstrates self-control in class					
Demonstrates self-control on playground					
Exhibits sense of humor					
Seeks help when needed					
Exhibits courtesy and respect					
Demonstrates ability to handle transitions					
PHYSICAL DEVELOPMENT					
Small muscle control & development					
Large muscle control & development					
Speech & articulation					

When you think of this child, what are the first words that come to mind?

Please comment on this child's strengths.

Please describe any significant areas of concern.

How would you characterize this child's interactions with other students? With adults?

What, if anything, frustrates this child and how does he/she respond?

SKILL DEVELOPMENT	Area of Strength	Appropriate for Age	Progressing toward Age Appropriate	Area of Concern	Comments
Is attentive					
Listens in a group					
Contributes to group discussions					
Works cooperatively					
Follows directions					
Demonstrates ability to focus on one task					
Completes tasks independently					
Respects classroom routines					
Makes transitions smoothly					
Responds positively to constructive criticism					
Is curious					
Is willing to try new activities					
Grasps new concepts					
Is a self-starter					
Enjoys new challenges					
Exhibits problem-solving ability					
Expresses ideas well verbally					
Exhibits self-help skills (hand washing, bathroom skills, etc.)					

Please comment on this child's academic skills.

Are the parents of this applicant supportive of their child's strengths and challenges? Have their expectations and perceptions of their child and the school been in alignment with yours and your school's? Please comment.

Are the parents of this child supportive of your school and its programs? _____

We would appreciate any additional information which you think would help our school make an informed decision.

Teacher Signature: _____ Date: _____