



Teacher Evaluation Form

Applicants Ages 6-11

Parents: Please Complete This Section

Applicant Name: _____ Teacher Name: _____

Current School/Daycare/Program: _____ Applicant Attends ____ days per week ____ hours per day

School Address: _____

School Telephone Number: _____ Teacher E-mail address: _____

Teachers: Please Complete This Section *(If no teacher available, please have an unrelated adult who knows your child well complete this form)*

The Bridge School thanks you in advance for your time in completing this form. Information you provide will be kept confidential and will not be shared with parents. The purpose of these questions is to allow us to better understand the students and families applying to The Bridge School. Please email us at info@buriencoopeducation.org if you have questions.

Please return the completed form directly to: **The Bridge School – P.O. Box 48074, Burien, WA 98148**

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

SOCIAL DEVELOPMENT	Area of Strength	Appropriate for Age	Progressing toward Age Appropriate	Area of Concern	COMMENTS	
Shows empathy toward others						COMMENTS
Sustains a positive attitude toward school and learning						
Actively seeks new challenges						
Cooperates in work and play						
Persists with difficult tasks						
Demonstrates ability to lead						
Demonstrates ability to follow						
Demonstrates self-control in class						
Demonstrates self-control on playground						
Exhibits sense of humor						
Seeks help when needed						
Exhibits courtesy and respect						
Helps out willingly						
Accepts responsibility for behavior						
Resolves differences by negotiating and compromising						
Observes class and school expectations						

ACADEMIC SKILLS	Above grade level	At grade level	Below grade level	
Reading/Language Arts				COMMENTS
Writing				
Mathematics				
Science				
Social Studies				
Problem solving				

CLASSROOM SKILL DEVELOPMENT	Area of Strength	Appropriate for Age	Progressing toward Age Appropriate	Area of Concern	
Is attentive and listens carefully during group time					COMMENTS
Contributes to group discussions					
Able to collaborate					
Follows directions					
Demonstrates ability to focus on one activity					
Completes tasks independently and with self-direction					
Respects classroom routines					
Makes transitions smoothly					
Responds positively to constructive criticism					
Is curious					
Is willing to try new activities					
Maintains standards for careful, neat work					
Is a self-starter					
Exhibits problem-solving ability					
Expresses ideas well verbally					

Questions about the Child

Does this child demonstrate particular strength in any of the following areas?

- Art
 Academic
 Music
 Social/Emotional
 Creativity
 Athletic
 Drama
 Other: _____

If yes, please elaborate.

Does this child need special support in any of the following areas?

- Academic
 Social/Emotional
 Physical
 Other: _____

If yes, please elaborate.

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

How does this child deal with frustration?

Questions about the Parents

Are the parents of this applicant supportive of their child's strengths and challenges? Please comment.

How do the parents of this child interact with children in the classroom?

How do parents communicate with you and other adults at the school?

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

If we need clarification, may we contact you by phone? YES NO Phone Number: _____

Teacher Signature: _____ Date: _____

Non Discrimination Policy

The Bridge School does not discriminate on the basis of religion, race, color, creed, national or ethnic origin, sexual orientation, family make-up or circumstances or any other legally protected status in the hiring of staff or in the administration of educational policies or programs, admissions policies or any other school administered programs.