

# CARROLLWOOD DAY SCHOOL

## Upper School Division

1515 W. Bearss Avenue • Tampa, Florida 33613 • Telephone: 813.920.2288

### STUDENT EVALUATION

\_\_\_\_\_ has applied for admission to Carrollwood Day School - Upper School Division  
(Student's Name)  
for \_\_\_\_\_ grade. We appreciate the time and effort involved in completion of the information on this form. Please be assured that all evaluative information reported is regarded as confidential in nature.

#### ACADEMIC EVALUATION: (Please circle appropriate ratings.)

Academic potential	limited (1)	fair (2)	average (3)	good (4)	outstanding (5)	Not Applicable (N/A)
Academic achievement	1	2	3	4	5	N/A
Self motivation	1	2	3	4	5	N/A
Study habits	1	2	3	4	5	N/A
Intellectual curiosity	1	2	3	4	5	N/A
Ability to work in a group	1	2	3	4	5	N/A
Ability to work independently	1	2	3	4	5	N/A
Participation in discussion	1	2	3	4	5	N/A
Ability to write	1	2	3	4	5	N/A
Ability to express ideas orally	1	2	3	4	5	N/A
Accepts classroom policies and procedures	1	2	3	4	5	N/A
Follows directions	1	2	3	4	5	N/A
Uses suggestions or corrections	1	2	3	4	5	N/A
Completes work in time allotted	1	2	3	4	5	N/A
Turns in assignments when due	1	2	3	4	5	N/A
Seeks help when needed	1	2	3	4	5	N/A
Attention span	1	2	3	4	5	N/A
Recommendation as a student	1	2	3	4	5	N/A

#### PERSONAL EVALUATION: (Please circle appropriate ratings.)

Integrity	limited (1)	fair (2)	average (3)	good (4)	outstanding (5)	Not Applicable (N/A)
Consideration of others	1	2	3	4	5	N/A
Social adjustment with peers	1	2	3	4	5	N/A
Leadership potential	1	2	3	4	5	N/A
Initiative (wholesome)	1	2	3	4	5	N/A
Classroom conduct	1	2	3	4	5	N/A
Stability	1	2	3	4	5	N/A
Sense of Humor	1	2	3	4	5	N/A
Self Confidence	1	2	3	4	5	N/A
Accepts responsibilities	1	2	3	4	5	N/A
Cooperates with adults	1	2	3	4	5	N/A
Parent Cooperation	1	2	3	4	5	N/A
Recommendation as a person	1	2	3	4	5	N/A

*Please complete both sides of form.*

Is this student working on grade level or above grade level in this subject area?	yes	no	N/A
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Would this student be eligible to re-enter your school at the next grade level?	yes	no	N/A
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Maturity in terms of age and grade (Please explain)	limited (1)	fair (2)	average (3)	good (4)	outstanding (5)	Not Applicable (N/A)
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Does this student demonstrate a pattern of unacceptable behavior? (If yes, please explain)	yes	no	N/A
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Does this student have any non-academic problems that impede academic success? (If yes, please explain)	yes	no	N/A
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**Please share your observations and any explanations which will help us understand this child and promote his/her successful transition to Carrollwood Day School - Upper School Division.**

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Print or type name

Subject Taught \_\_\_\_\_

\_\_\_\_\_  
School name

Final Grade Received \_\_\_\_\_

\_\_\_\_\_  
School address

**Please attach transcripts.**

Please mail to:

**Admissions Office  
Carrollwood Day School  
Upper School Division  
1515 W. Bearss Avenue  
Tampa, Florida 33613**

*Please complete both sides of form.*