

Teacher Report 2012-13 Confidential



_____ gives permission for _____
(Parent/ Guardian Signature) (Your Child's Current School)

to send to Trinity Christian School information concerning _____.
(Student's Name & Grade)

Dear Teacher/Administrator,

_____ is applying for admission to Trinity Christian School. We are requesting your assistance in evaluation of this student for acceptance. Thank you for your insights and cooperation. Please mail or fax this form to Trinity.

Date Enrolled: _____ Number of Absences: _____ Number of Tardies: _____

ACADEMIC ASSESSMENT

Please check appropriate levels:

Reading: grade level _____ above grade level _____ below grade level _____

Math: grade level _____ above grade level _____ below grade level _____

Handwriting: grade level _____ above grade level _____ below grade level _____

Speech: grade level _____ above grade level _____ below grade level _____

Last Achievement Score Percentiles or Grade Equivalent:

Reading _____ Math _____ Total Battery _____

Please Briefly Assess:

Social Skills/Interests _____

Motivation/Academic Potential _____

Behavior _____

Teachers: Please return this directly to Trinity Christian School as soon as possible.

(Parents are to forward this form to your current or last teacher)

Teachers Name

Teachers Signature