



Applicant's Name \_\_\_\_\_ Applying for Grade \_\_\_\_\_

**Counselor or Administrator Evaluation**

Name of School: \_\_\_\_\_

1. I have known the above applicant for \_\_\_\_\_ as his/her \_\_\_\_\_

2. This report is based on: \_\_\_\_\_ Personal observation and contact with student \_\_\_\_\_ Teacher Comments \_\_\_\_\_  
Other counselor's observations \_\_\_\_\_ Records \_\_\_\_\_ Other (explain) \_\_\_\_\_

3. The student has been sent to the office for disciplinary reasons: \_\_\_\_\_ Often \_\_\_\_\_ Seldom \_\_\_\_\_ Never

Please describe problem(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. This student has been suspended \_\_\_\_\_ times. Reason(s) \_\_\_\_\_

5. Has the applicant been expelled or dismissed from school for academic or disciplinary reasons and therefore not eligible to return? \_\_\_\_\_ Yes \_\_\_\_\_ No Explain: \_\_\_\_\_

6. Do you have any reason to doubt this student's academic integrity? \_\_\_\_\_ Yes \_\_\_\_\_ No

7. The applicant's attendance has been: \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Poor

8. The applicant's parents can best be described as: (Circle as many as apply)

Involved    Cooperative    Difficult    Uninvolved    Tends to blame school for student's problems

9. Does the applicant have any significant limitations (physical, social/emotional, academic/learning disabilities)

Please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name (Printed) \_\_\_\_\_ Signature \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_