ARCHDIOCESE OF LOS ANGELES

Confidential Common Evaluation Form For Students Applying to a Catholic High School

THIS SECTION IS COMPLETED BY A PARENT OF THE STUDENT APPLICANT

EMAIL ADDRESS:			HOME PHONE: ()	
HOME ADDRESS:STREET			CITY	STATE	ZIP
NAME OF APPLICANT:LAS		FIRST	MIDDLE		
PARENT/LEGAL GUARDIAI	N PRINTED NAME: _			_ DATE:	
PARENT/LEGAL GUARDIAI	N SIGNATURE:				-
PARENTAL PERMISSION For school to send student info					

TO THE PRINCIPAL, ENGLISH TEACHER, AND MATH TEACHER:

This form is to be completed by a school official and returned directly to each high school. This CONFIDENTIAL evaluation will be used only by persons on the Admissions Committee and will not become part of the student's cumulative folder. Therefore, this form will not be open to general review and will not be forwarded to any other school or institution. Your carefully considered judgment will have a strong and direct bearing on this student's acceptance. Please provide information which you think should influence our decision, i.e. gifts, talents, abilities in/outside of the classroom, and/or any challenges or difficulties the student might have faced. We appreciate your honesty and your effort.



POSITION OF PERSON COMPLETI	NG FORM:				
PRINCIPAL ENGLISH/LANGUAGE		TS TEACHER			
MATH TEACHER OTHE	HER OTHER (Specify:)				
PRINTED NAME OF PERSON COM	IPLETING EVALUATION	ON:			
EMAIL ADDRESS OF PERSON CON	//PLETING EVALUATI	ON:			
SIGNATURE REQUIRED:				_ DATE:	
SCHOOL:		PHO	NE:		
SCHOOL ADDRESS					
STRI	 -		CITY	ZIP CODE	
NAME OF APPLICANT: LAST		FI	RST	MIDDLE	
Conf	idential Comn	non Eval	uation For	m	
STUDENT RATING	EXCELLENT	GOOD	AVERAGE	POOR	UNABLE TO RESPOND
MOTIVATION:					
SENSE OF RESPONSIBILITY:					
PERSONAL RELATIONSHIPS:					
INITIATIVE AND LEADERSHIP:					
COOPERATION/EFFORT					
GENERAL CONDUCT/BEHAVIOR					
WORK AND STUDY HABITS					
INTEGRITY					
DEMONISTRATION OF FAITH					



RECOMMENDATIONS STRONGLY RECOMMEND WITH RECOMMEND (Please explain) ACADEMICALLY OBSERVED CHARACTER OVERALL PRINTED NAME OF PERSON COMPLETING EVALUATION:						
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OSITION:	OSITION:					



ARCHDIOCESE OF LOS ANGELES Principal/School Evaluation

Confidential Optional Evaluation Form developed by each high school

This will allow each high school to gather information they feel is essential to their decision-making process but is not contained on the common teacher evaluation form.

[RECOMMENDED A RELEASE OF INFORMATION]

Parental Permission for Release of Information: I hereby give my permission for the elementary/middle school to send student information to the requested Catholic high schools. I waive my right to view these records.

PARENT/LEGAL GUARDIAN SIGNATURE: _	
PRINTED NAME:	DATE:

To the Applicant [Recommended an outline of the procedure with any school-specific instruction]

[Form continues with requests for information that is usually asked for by the school. May want to include specific information not found on the common teacher evaluation form. This could be personal or academic attributes or course placement (honors-regular-remedial)]

[Some teacher evaluations for a particular student may vary depending upon the high school or type of high school for which the student is applying. This principal/school evaluation page, developed by each high school, will allow the middle school teacher the opportunity to individualize their recommendation, if needed, to each high school.]

