

CONFIDENTIAL

Name of Student _____ Current Grade _____
 School _____ Date _____
 Address _____ Phone _____
 Your name (print) _____ Position _____
 How long and in what context have you known this student? _____

To help us determine how best to meet the needs of this student, please provide frank and candid responses.

Academic	No Opportunity to Observe	Excellent	Satisfactory	Unsatisfactory
Study Habits				
Attention Span				
Ability to Work Independently				
Ability to Organize and Communicate Ideas				
Motivation				
Intellectual Curiosity				
Critical and Abstract Thinking Skills				

Personal	No Opportunity To Observe	Excellent	Satisfactory	Unsatisfactory
Creativity				
Self-confidence				
Leadership Potential				
Reaction to Criticism				
Reaction to Setbacks				
Concern for Others				
Personal Conduct				
Personal Integrity				
Ability to Act Independently				
Ability to Work Cooperatively				
General Level of Maturity				

In lieu of the checklist above, please feel free to describe in your own words your observation of the student's character, motivation, and abilities, both socially and academically. Attach an extra sheet if necessary.

Please tell us about this student's special talents, abilities, and interests. _____

Are there any factors that have had an impact on this student's academic progress or social relationships?

Has this student ever been in any disciplinary processes? Please relate the incident(s) and any disciplinary action that resulted. _____

Counselor's Signature

Date

Thank you for your time in completing this form. Please make a copy for your records and return a copy to Kimberton Waldorf School Admissions office.