



# CHRIST THE KING School

A COMMUNITY *uniting* school, family, and faith

## Student Evaluation Form - Rising 6-8th grades (Page 1/2)

To Parent: Please complete this section and deliver this form to your child's teachers.  
Forms will be mailed directly to the CKS Admissions Office.

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student is Called: \_\_\_\_\_ Sex:  M  F

Applicant's Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_

School Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluator: Please fill out the following. If you would like to provide additional information, please do so in the comments section.

Number of days absent during the year: \_\_\_\_\_ Number of days tardy: \_\_\_\_\_ Number of times tardy to class: \_\_\_\_\_

How long and in what capacity have you known the applicant? \_\_\_\_\_

<b>Academic Skills</b>	Excellent	Good	Fair	Poor/limited
Critical/Abstract Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>English/Language Arts</b>	Excellent	Good	Fair	Poor/limited
Reading comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written expression – Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written expression – Composition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Names of English Textbooks/Publishers: \_\_\_\_\_

<b>Math</b>	Excellent	Good	Fair	Poor/limited
Knowledge of basic skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application of skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Names of Math Textbooks/Publishers: \_\_\_\_\_

Christ the King School

46 Peachtree Way NE • Atlanta, GA, 30305 • (404) 233-0383 • [admissions@christking.org](mailto:admissions@christking.org)

## Student Evaluation Form - Rising 6-8th grades (Page 2/2)

### Work Skills

- |                               |  |   |   |  |
|-------------------------------|--|---|---|--|
| Class participation           | <input type="checkbox"/> Joins in readily        | <input type="checkbox"/> Contributes occasionally | <input type="checkbox"/> Wants to dominate      | <input type="checkbox"/> Rarely contributes            |
| Ability to work in a group    | <input type="checkbox"/> Consistently works well | <input type="checkbox"/> Sometimes                | <input type="checkbox"/> Has difficulty         | <input type="checkbox"/> Has great difficulty          |
| Ability to work independently | <input type="checkbox"/> Consistently works well | <input type="checkbox"/> Needs help occasionally  | <input type="checkbox"/> Needs help frequently  | <input type="checkbox"/> Needs constant help           |
| Completes assignments on time | <input type="checkbox"/> Consistently completes  | <input type="checkbox"/> Usually completes        | <input type="checkbox"/> Needs additional time  | <input type="checkbox"/> Has difficulty                |
| Follows directions            | <input type="checkbox"/> Easily and accurately   | <input type="checkbox"/> Occasionally needs help  | <input type="checkbox"/> Needs much explanation | <input type="checkbox"/> Rarely                        |
| Takes initiative              | <input type="checkbox"/> Always                  | <input type="checkbox"/> Usually                  | <input type="checkbox"/> Sometimes              | <input type="checkbox"/> Rarely                        |
| Attention span                | <input type="checkbox"/> Actively engaged        | <input type="checkbox"/> Attentive                | <input type="checkbox"/> Variable attention     | <input type="checkbox"/> Requires frequent redirection |

### Social Skills

- |                              |   |  |  |   |
|------------------------------|---|--|--|---|
| Peer relations               | <input type="checkbox"/> Role model       | <input type="checkbox"/> Healthy relationships | <input type="checkbox"/> Occasional problems | <input type="checkbox"/> Relates poorly       |
| Relationships with adults    | <input type="checkbox"/> Courteous        | <input type="checkbox"/> Usually positive      | <input type="checkbox"/> Occasional problems | <input type="checkbox"/> Shows little respect |
| Concern for others           | <input type="checkbox"/> Very considerate | <input type="checkbox"/> Considerate           | <input type="checkbox"/> Usually considerate | <input type="checkbox"/> Rarely considerate   |
| Attitude toward school       | <input type="checkbox"/> Excellent        | <input type="checkbox"/> Good                  | <input type="checkbox"/> Fair                | <input type="checkbox"/> Poor                 |
| Displays appropriate conduct | <input type="checkbox"/> Always           | <input type="checkbox"/> Usually               | <input type="checkbox"/> Sometimes           | <input type="checkbox"/> Rarely               |

Areas in which the applicant has the greatest strengths:

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Areas in which the applicant has the greatest needs:

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Has the applicant ever been a recipient of or recommended for a special services program? *(check those that apply)*

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Psycho-educational Testing | <input type="checkbox"/> IEP/504 Plan  | <input type="checkbox"/> Learning disability resource center | <input type="checkbox"/> Grade retention |
| <input type="checkbox"/> Extra help or tutoring     | <input type="checkbox"/> Extended time | <input type="checkbox"/> Speech therapy                      |  |

If yes, please explain:

Describe the ways applicant contributes to your school community (character, citizenship, leadership):

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Please describe the parental support/involvement:

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### Personal qualities

- |                                |   |  |  |   |
|--------------------------------|---|--|--|---|
| Integrity                      | <input type="checkbox"/> Highly trustworthy | <input type="checkbox"/> Trustworthy         | <input type="checkbox"/> Usually trustworthy     | <input type="checkbox"/> Questionable       |
| Personality                    | <input type="checkbox"/> Always friendly    | <input type="checkbox"/> Usually friendly    | <input type="checkbox"/> Occasionally friendly   | <input type="checkbox"/> Rarely friendly    |
| Sense of humor                 | <input type="checkbox"/> Highly developed   | <input type="checkbox"/> Good                | <input type="checkbox"/> Fair humor              | <input type="checkbox"/> Poorly developed   |
| Cooperation                    | <input type="checkbox"/> Always cooperates  | <input type="checkbox"/> Cooperates          | <input type="checkbox"/> Occasionally cooperates | <input type="checkbox"/> Poor cooperation   |
| Citizenship                    | <input type="checkbox"/> Excellent          | <input type="checkbox"/> Good                | <input type="checkbox"/> Fair                    | <input type="checkbox"/> Poor               |
| Attitude toward school         | <input type="checkbox"/> Excellent          | <input type="checkbox"/> Good                | <input type="checkbox"/> Fair                    | <input type="checkbox"/> Poor               |
| Self control                   | <input type="checkbox"/> Excellent          | <input type="checkbox"/> Good                | <input type="checkbox"/> Fair                    | <input type="checkbox"/> Poor               |
| Leadership potential           | <input type="checkbox"/> Leader             | <input type="checkbox"/> Can follow or lead  | <input type="checkbox"/> Leads on occasion       | <input type="checkbox"/> Rarely leads       |
| Self confidence                | <input type="checkbox"/> Healthy self-image | <input type="checkbox"/> Needs some support  | <input type="checkbox"/> Seems overconfident     | <input type="checkbox"/> Poor self-image    |
| Reaction to criticism/setbacks | <input type="checkbox"/> Excellent          | <input type="checkbox"/> Good                | <input type="checkbox"/> Fair                    | <input type="checkbox"/> Poor               |
| Responsibility                 | <input type="checkbox"/> Very responsible   | <input type="checkbox"/> Usually responsible | <input type="checkbox"/> Sometimes responsible   | <input type="checkbox"/> Rarely responsible |
| Emotional maturity             | <input type="checkbox"/> Very mature        | <input type="checkbox"/> Age appropriate     | <input type="checkbox"/> Sometimes immature      | <input type="checkbox"/> Very immature      |

### Comments:

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Thank you for your time and evaluation of this applicant. May we contact you if we have questions?  Yes  No

Evaluator's Name (please print):

Phone:

Evaluator's Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_

Date: \_\_\_\_\_