



STUDENT EVALUATION FORM - GRADES 1-6

The student whose name appears below has applied for admission to the International School of Western Australia. This reference is an important part of the application and your cooperation in providing a full and candid report will be greatly appreciated.

Name of Student: _____

Applying for grade: _____

Name and address of school currently attended: _____

Name of person completing this student reference: _____

Position: _____

Length of time acquainted with the student: _____

	Never	Occasionally	Usually	Always
The student demonstrates self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student responds positively to the challenge of academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student is respectful and courteous to peers and adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student displays a well-balanced temperament	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student is able to work independently for an age-appropriate period of time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student cooperates with others during group activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The student exhibits age-appropriate study habits and organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Please write a short descriptive assessment of this student to include reference to the student's academic strengths and weaknesses, special interests and talents, character and maturity.

2. Has this student been recommended for and is he or she receiving any special education services and/or tutoring support? Please explain.

3. Have there been any disciplinary, emotional or other concerns regarding this student? Please explain.

Signed: _____

Date: _____

If you would like to give us further information over the telephone, please tick here

Your telephone number: _____

Best time to call: _____

Your email address: _____

**RETURN COMPLETED FORM TO
INTERNATIONAL SCHOOL OF WESTERN AUSTRALIA (ISWA)**

INTERNATIONAL SCHOOL
of WESTERN AUSTRALIA



A U N I Q U E V I E W O N E D U C A T I O N

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