

Saint Luke Catholic School
7005 Georgetown Pike
McLean, Virginia 22101
703-356-1508 (fax) 703-356-1141

SCHOLASTIC INFORMATION FORM
(CONFIDENTIAL)

Name of Student: _____ (Please print)

Date: _____

*Note: If you are applying for Kindergarten and your child is attending preschool or daycare, please have his/her teacher complete and return this form to Saint Luke Catholic School as soon as possible.
A child cannot be considered for admission without this completed form.*

I have known this candidate _____ years. My relationship has been that of _____.

To the Teacher or School Director: We appreciate your cooperation in completing this form. The items below ask for your sense of this student's relationships within the school community, emotional and social growth, and intellectual development. Your insight will help us to get to know this child. We understand the difficulty in evaluating a student, and are fully aware that children are constantly growing, changing and developing. Thank you for your help. **Please return this form to Saint Luke Catholic School**

- What are the first words that come to mind when asked to describe this candidate?

- What are the applicant's special interests?

					COMMENTS
Overall Conduct	Good Conduct	Usually Good Conduct	Occasional Misconduct	Frequent Disruption	
Consideration for Others	Unusually Thoughtful	Usually Considerate	Inconsiderate	Unkind	
Social Relationships with Peers	Healthy Relationship	Has Occasional Minor Problems	Relates Poorly		
Leadership Ability	Excellent	Good	Average	Poor	
Emotional Maturity	Very Mature	Average	Somewhat Mature	Very Immature	
Self-confidence	Healthy Self-Image	Needs Some Support	Seems Overly Confident	Poor Self-image	
Sense of Responsibility	Responsible	Usually Responsible	Somewhat Responsible	Rarely Responsible	
Relationship with Adults	Is Comfortable	Avoids Contact	Is Dependent		

PARTICIPATION IN GROUP ACTIVITIES					
Small Group	Enthusiastic	Frequent	Occasional	Rare	
Large Group	Enthusiastic	Frequent	Occasional	Rare	
Self-motivation					
Organization of time & work					

	EXCELLENT	GOOD	FAIR	POOR	COMMENTS
Attendance					
Attention Span					
Intellectual Curiosity					
Ability to express ideas orally					
Ability to work independently					
Perseverance					
Parent Cooperation					
Parent Involvement in School Affairs					

We would appreciate additional comments and observations concerning the strengths, weaknesses, health or special needs of this student, or any other information that you think would be helpful. You may use a separate sheet of paper for further comments in any category.

Signature/Title

Print or type name

School Name

Address (City, State and Zip Code)

Phone Number