



SCHOOL RECORDS REQUEST FORM

To the Registrar of _____
(Name of School)

(School's address and phone number)

Name of Student _____

The student named above has applied to Evergreen School. Please send copies of the following information.

1. The student's progress reports (2 most recent) from your school, and any other schools he/she has attended.

Please send progress reports for current school year as soon as they are available.
2. All testing information and/or test scores (i.e., CAT, ERB, CTBS, WISC III, SAT, Stanford)
3. Copies of any health records that you have.

Please forward the above to:

Evergreen School
Attn: Admissions Office
10700 Georgia Avenue
Silver Spring, MD 20902

Thank you for your cooperation and prompt attention to this request!

I hereby give my permission for my student's progress/grade reports, test scores, and health records to be sent to Evergreen School.

Parent(s)/Guardian(s) Signature

Date



INDEPENDENT SCHOOL STUDENT RECOMMENDATION

Nursery School, Kindergarten, First Grade

Evergreen School
 10700 Georgia Avenue
 Silver Spring, MD 20902

Name of student _____ Birthdate _____

Application for Grade _____ I have known this student for _____ (years/months)

My relationship has been that of _____ Date _____

To the Teacher or School Director: We appreciate your cooperation in completing this form. You may place you check mark in any column to the right of left to show graduations within each category. This form provides one way of getting to know the child and is reviewed with the full awareness that young children are constantly changing and developing.

SOCIAL DEVELOPMENT	USUALLY	SOMETIMES	SELDOM	COMMENTS
Can be a friend				
Is supportive of peers				
Is comfortable with adults				
Plays alone happily				
Cooperates in play				
Shares well				
Initiates play activities				
Is imaginative				
Has the capacity to lead				
Has the capacity to follow				
Uses materials purposefully				

PHYSICAL DEVELOPMENT	OUTSTANDING	AGE APPROPRIATE	NEEDS DEVELOPMENT	COMMENTS
Small muscle control & coordination				
Large muscle control & coordination				
Speech development (articulation)				
Please identify any special needs, including auditory and visual development				

PRE-ACADEMIC SKILL DEVELOPMENT	USUALLY	SOMETIMES	SELDOM	COMMENTS
Is attentive				
Listens in a group				
Contributes to group discussions				
Follow directions				
Works cooperatively				
Completes tasks				

PRE-ACADEMIC SKILL DEVELOPMENT (continued)	USUALLY	SOMETIMES	SELDOM	COMMENTS
Demonstrates ability to focus on one task				
Respects classroom routines				
Moves easily from one activity to another				
Responds positively to constructive criticism				
Is curious				
Is willing to try new activities				
Is a self-starter				
Enjoys new challenges				
Exhibits problem solving abilities				
Expresses ideas well				

Please describe the child's development of:

Beginning reading skills _____

Beginning math skills _____

Parent cooperation and involvement with the school: _____

PERSONAL CHARACTERISTICS: Please describe the child and include comments on her/his personality, maturity, confidence, assertiveness, humor, and degree of independence. We welcome any other information which you think would be helpful. You may use a separate sheet of paper for further comments.

Signature of Teacher

Print or type name

School address and zip

School telephone

Please return this form directly to:

*Admissions Office
Evergreen School
10700 Georgia Avenue
Silver Spring, MD 20902*



INDEPENDENT SCHOOL STUDENT RECOMMENDATION

Entering grades 2-3

Evergreen School
10700 Georgia Avenue
Silver Spring, MD 20902

Name of student _____ Birthdate _____

Name of person completing this form _____

Application for Grade _____ I have known this student for _____ (years/months)

My relationship has been that of _____ Date _____

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 intellectual development, emotional and social growth, and relationships within the school community. Your insights are invaluable in helping us to know this child better. This form provides one way of getting to know the child and is reviewed with the full awareness that children are constantly changing and developing. All recommendations are considered confidential and will not be shared with parents or students.

What are the first words that come to mind to describe this student?

What are the student's special interests?

What courses do you teach this student?

As you make the following evaluations you may place that check mark to the left or right within a given section to indicate gradations in your judgement.

	OUT- STANDING	AGE APPROPRIATE	NEEDS DEVELOPMENT	COMMENTS
Conduct				
Consideration for others				
Social relationship with peers				
Leadership ability				
Emotional maturity				
Self-confidence				
Sense of humor				
Integrity				
Sense of responsibility				
Relationship with adults				
Study habits				
Self-motivation				
Organization for time and work				
Intellectual curiosity				
Attention span				
Ability to express ideas orally				

	OUT- STANDING	AGE APPROPRIATE	NEEDS DEVELOPMENT	COMMENTS
Ability to follow directions				
Ability to work independently				
Ability to work in a group				
Perseverance				
Academic promise				
Academic achievement				
Creativity				
Attendance				
Parent cooperation				
Parent Involvement				

This student reads for pleasure: Much _____ Some _____ Little _____

In relation to students of the same age, please indicate your overall evaluation of this applicant:

As a student: Outstanding _____ Excellent _____ Good/Average _____ Fair _____ Poor _____

As a school citizen: Outstanding _____ Excellent _____ Good/Average _____ Fair _____ Poor _____

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

Signature of Teacher

Print or type name

School address and zip

School telephone

Please return this form directly to:

*Admissions Office
Evergreen School
10700 Georgia Avenue
Silver Spring, MD 20902*

*Phone: 301-942-5979
Fax: 301-946-0311*