TEACHER EVALUATION

To be completed by the teacher.

Teacher's name _____ Subject taught _____

School _____

Telephone _____ E-mail _____

How long have you known the student? _____

Rate this student in terms of:

ACADEMIC	Excellent	Above Average	Average	Below Average	Comments
Study habits					
Demonstrate critical thinking skills					
Complete work on time					
Participate actively in class					
Cooperates with teachers					
Works well with others					
Mange time effectively					
Work well independently					

PERSONAL	Excellent	Above Average	Average	Below Average	Comments
Demonstrate leadership skills					
Demonstrate creativity					
Demonstrate Integrity					
Relates well to peers					
Responds appropriately to criticism					
Involve in activities beyond classroom					
Treat others with respect and dignity					
Take responsibility for actions					

Additional Information (use a separate page if needed)

1. Please describe student's academic strengths/weaknesses. (Such as unique talents, study habits, achievements, etc.)

2. Please describe student's personal strengths/weaknesses. (Such as personal qualities, behavior, relational skills with peers, activities outside of classroom, etc.)