



**MILTON
GOTTESMAN**
JEWISH DAY SCHOOL
OF THE NATION'S CAPITAL

with soul in mind

Confidential Teacher Evaluation Form

Grade 2 to Grade 8- Judaic Studies

Kay and Robert Schattner Center

6045 16th St. NW, Washington, DC 20011

4715 16th St., NW, Washington, DC 20011

Phone: 202-291-5737, ext. 2207 Fax: 202-291-4686

Email: admission@MiltonGottesman.org

Name of Student _____ Date of Birth _____

Current school _____ Current Grade _____

Name of person completing evaluation form _____ Applying for Grade _____

Subject or class that I teach _____ Texts Used _____

I have known this student for _____ years/months .

For parents/guardians: I hereby waive my right to access this recommendation and authorize the above-named person to provide an evaluation and all relevant information to MILTON for purposes of my child's application to attend the school.

Parent/Guardian Signature _____ Date _____

Judaic Studies Teacher: Please complete this form in order to assist us in the evaluation and placement of this student. Please attach additional sheets of paper if you need additional space.

Character and personality traits	Advanced for age	Appropriate for age	Needs	No basis for Judgment	Comments
Conduct					
Leadership					
Maturity					
Social relationship with peers					
Self-confidence					
Integrity					
Sense of humor					
Sense of responsibility					
Interaction with teachers/adults					
Participation in life of the school					
Creativity					
Respect for others					
Concern for others					

Academic traits	Advanced for age	Appropriate for age	Needs	No basis for Judgment	Comments
Academic potential					
Academic achievement					
Self-motivation					
Effort/initiative					
Study habits/organization of work					
Intellectual curiosity					
Level of engagement					
Commitment to homework					
Ability to follow directions					
Ability to work independently					
Ability to work as a group					
Ability to express ideas orally					
Ability to express ideas in writing					
Attendance					
Participation in class					

Briefly describe the content of your course. What are the frequency, nature, and length of reading and writing assignments in and outside of class?

How would you assess this student's reading skills and general interest in reading beyond assigned work?

What are the strengths and weaknesses of this student's written work?

How does this student respond to advice or criticism? Is he/she easily discouraged? Is he/she willing to work to overcome difficulties?

What are this student's overall academic strengths and weaknesses?

Please describe any special accommodations that are provided for this student.

Please make any additional comments regarding this student's abilities, attendance, personal qualities, and special interests.

Please describe any special accommodations that are provided for the student.

If you would like to speak confidentially about this student, please feel free to contact Sindy Udell, Director of Admission, 202-291-5737, ext. 2207, sindy.udell@MiltonGottesman.org, or provide your phone number along with the best day and time to reach you.

Submitted by: _____ Date: _____ Email: _____

Please return this form by mail or email to:
Office of Admission
Milton Gottesman Jewish Day School
Kay and Robert Schattner Center
4715 16th Street, NW, Washington, DC 20011
admission@MiltonGottesman.org