

## **Teacher Evaluation**

## **Confidential**

(Please obtain from current teacher or previous grade level teacher)

| Student Name                        |   |         |
|-------------------------------------|---|---------|
| Name of School                      |   |         |
| Teacher's Name                      |   |         |
| How long have you known             | the student?  |         |
| In which grade and/or sub           | oject(s) did you teach this stud                              | ent?    |
| Please rate the student i           | n each of the areas below:                                    |         |
| Expectation                         | Rating 1-5 (5-Excellent)                                      | Comment |
| Work Ethic                          | $\Box 1$ $\Box 2$ $\Box 3$ $\Box 4$ $\Box 5$                  |         |
| Attendance                          | □1 □2 □3 □4 □5  |         |
| Classroom Behavior                  | □1 □2 □3 □4 □5  |         |
| Potential to meet high expectations |   |         |
| relates to the child's chara        | s of the child's strengths and vacter and classroom/playgrour |         |
| Teacher Signature                   |   | Date    |

Please place this recommendation in a sealed envelope and return to the applicant or mail it directly to:

Desert Springs Christian Academy 210 S. Nevarez St. Las Cruces, NM 88001