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For each item in the tables below, please check the most developmentally age-appropriate description of this child.

Academic Performance	Did Not Observe	Needs Improvement	Emerging	Noticeably Developing	Age Appropriate Consistent	Advanced	Exceptional
Academic ability							
Academic performance							
Participation in discussions							
Ability to express ideas orally							
Ability to express ideas in writing							
Follows directions							
Prepared for class							
Attention span							
Use of class time							
Seeks help when needed							

Comments: \_\_\_\_\_  
 \_\_\_\_\_

Family Information	Did Not Observe	Rarely	Sometimes	Usually	Consistently
Has realistic expectations for their child					
Communicates openly with the school					
Follows the rules and policies of the school					
Cooperates with classroom teachers					
Follows through with school recommendations					
Cooperates with school administration					
Participates in school activities					
Is punctual with drop-off and pick-up procedures					

Comments: \_\_\_\_\_  
 \_\_\_\_\_

What are this child's greatest strengths? \_\_\_\_\_  
 \_\_\_\_\_

What are this child's challenges? \_\_\_\_\_  
 \_\_\_\_\_

Describe this child's approach to learning (hands on, visual, kinetic, auditory, logical) and/or what kind of classroom environment would be a good match for this child. \_\_\_\_\_  
 \_\_\_\_\_

Child's enrollment period at your school:

**Start Date** Month: \_\_\_\_\_ Year: \_\_\_\_\_ **End Date** Month: \_\_\_\_\_ Year: \_\_\_\_\_

**SPECIFIC RECOMMENDATION:**

- ☐ Recommended ☐ Recommended with reservations (*please explain below*) ☐ Prefer not to make a recommendation (*please explain below*)

☐ Check here if any information pertaining to this child/family would be better communicated by phone. Please feel free to add further narrative on additional page(s) if desired.

Form completed by (print name) \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

Your signature \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

School Name \_\_\_\_\_ Director/Principal's Email \_\_\_\_\_

Director/Principal's Name \_\_\_\_\_ Director/Principal's Phone \_\_\_\_\_