

TEACHER EVALUATION FORM FOR K-5



Gantry Academy  
Attention: Admissions  
1801 Redbud Lane, Ste. B-295  
Round Rock 78664

PART I

**Parents:** Please complete the top portion of this form and deliver it to your child’s current teacher. Ask that it be completed and returned directly to Gantry Academy. It is important that this letter does not pass back through you. Please provide the teacher with a stamped envelope addressed to Gantry Academy, at the address above. If you prefer, you may have the teacher scan and email this document to *admissions@gantryacademy.org*.

Applicant’s Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Name of Current School: \_\_\_\_\_

Applying to grade level: \_\_\_\_\_

Current grade: \_\_\_\_\_

PART II

**Teacher:** Thank you for taking the time to complete this evaluation. Please note that the information you submit will be considered confidential and will be seen only by those who are members of the Admissions Committee as part of our admissions process. This evaluation is not to be shared with the applicant’s parents, either by you or by Gantry Academy.

Teacher completing the form: \_\_\_\_\_

Subject Areas: \_\_\_\_\_

Adult/child ratio in class: \_\_\_\_\_

Adult/child ratio in small learning groups: \_\_\_\_\_

May we contact you? \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Teacher Evaluation Form for K-5

Applicant's Name: \_\_\_\_\_

Please answer the following questions fully and to the best of your knowledge. We appreciate your candidness. Your feedback will be held in the strictest of confidence and will be used for admissions purposes only. You may use additional paper to answer the following questions.

How long have you known this learner?

In what capacity do you know this learner?

What are the first 3 words that come to mind when reflecting on this learner?

How would you describe the learner with regard to the following:

Attention span

Ability to transition from one task to the next

Sharing classroom resources

Typical participation in group process

## Teacher Evaluation Form for K-5

Applicant's Name: \_\_\_\_\_

Stamina for working independently

Strategies used for self regulation

Following instructions to bring project from start to finish

How would you characterize the parents attitude and involvement in the classroom/at school?

Any other ideas that you believe would be helpful to a potential new teacher...

I certify that everything that I have written on this document is true and complete to the best of my knowledge and experience.

\_\_\_\_\_  
Signature of teacher completing form

\_\_\_\_\_  
Date