



**KINDERGARTEN ONLY**

**HOLY FAMILY PARISH SCHOOL  
KINDERGARTEN ASSESSMENT / RECOMMENDATION  
2009-2010 school year application**

(Please present this form to your child's current teacher or caregiver to complete and forward directly to Holy Family Parish School) **All teacher and caregiver assessments/recommendations are kept confidential. This form is due to Holy Family School by Friday, March 6<sup>th</sup>.**

I give my permission for my child's teacher or caregiver to complete this form.

**Parent Signature:** \_\_\_\_\_

Student Applicant: \_\_\_\_\_

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

Teacher: \_\_\_\_\_

School Address: \_\_\_\_\_

Grade level: \_\_\_\_\_

City, State: \_\_\_\_\_

How long you have known the student: \_\_\_\_\_

School phone: \_\_\_\_\_

What are the first three words that come to mind when you think of this student?

\_\_\_\_\_

**Please complete the following assessment chart:**

	<b>Outstanding</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>
Follows directions				
Listens attentively				
Works independently				
Exhibits appropriate large and fine motor skills				
Maintains focus and attention				
Initiates activities				
Separates easily from parents				
Expresses thoughts and ideas clearly				
Displays confidence and positive self- image				
Cooperates and participates in activities				
Respects rights and feelings of others				
Displays appropriate transition-time behavior				

**Teacher's recommendation for next year:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Teacher's signature:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Please return this completed form to the following address by March 6<sup>th</sup>.**

**Holy Family Parish School  
Attn: Jackie Degel, Principal  
7300 - 120<sup>th</sup> Avenue Northeast  
Kirkland, WA 98033**