

Relationships with adults

Confidential Instructor Evaluation

Instructor's name:		Phone/email:		
is being considered for admission at Gantry View, an independent school that stresses both individualized instruction and participation in mixed-age group activities. Some of our primary concerns for an applicant are their ability to work independently and how they function in a small-group setting. We appreciate your taking the time to complete this evaluation.				
For the following areas, please check off the answer that best describes the student.				
Area	Not yet	Sometimes	Most of the time Always	
Holds, uses a pencil				
Cuts with scissors				
Uses a spoon, fork				
Manages bathroom needs				
Gets dressed (jacket, shoes, buttons, zippers)				
Shares with others				
Takes turns with others				
Peer relationships				
Functions well in a group				
Considers others				
Emotional maturity				
Sense of humor				
Takes responsibility				
Self-control				



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Signature	Date
Position/subject you teach:	
Place of instruction:	
Is there any other information about this student or the	ne family that would be helpful to know?
Please describe the student's parents' involvement ar	nd cooperation.
Are there any concerns about attendance or promptne	ess?
In what areas has this student needed special support	or help?
In what areas does this student show particular streng	gth?
How long have you know the student, and in what co	ontext?

Please email this form to: admin@gantryviewschool.com