



Child's Name _____ Date of Birth ___/___/___

The child named above has recently made application for admission to East Texas Christian Academy. The Admission Committee appreciates your candid assessment of this candidate since you have worked closely with both the child and parents. Your input is important to us in our decision-making process. **Be assured that the contents of this evaluation will in no way be discussed with either parent or guardian.**

Evaluations must be directly returned to East Texas Christian Academy and any returned via the parent will be rejected.

PARENT WAIVER: As evidenced by my signature, I hereby waive the right to review or discuss this recommendation.

Parent / Guardian Signature Date

Please use the following scale to describe each area of development.
VG = Very Good Progress; **G** = Good Progress; **L** = Limited Progress; **NA** = Not Applicable

Part I:

<p>A. Social Development</p> <p>Interacts well with classmates _____</p> <p>Shows respect for property of others _____</p> <p>Has positive relationships with adults _____</p> <p>Takes part in group activities _____</p> <p>Is helpful to others _____</p> <p>Abides by school / class rules _____</p> <p>B. Auditory Perception</p> <p>Recognizes rhyming sounds _____</p> <p>Listens to & enjoys rhymes / songs _____</p> <p>Is able to follow basic oral directions _____</p> <p>C. Small Muscle Coordination</p> <p>Holds and uses a crayon correctly _____</p> <p>Holds and uses scissors correctly _____</p> <p>Traces a line accurately _____</p> <p>Dominant hand: <input type="checkbox"/> Right <input type="checkbox"/> Left</p>	<p>D. Language</p> <p>Speaks clearly _____</p> <p>Retells story in sequence _____</p> <p>E. Large Muscle Coordination</p> <p>Bounces a ball and catches it _____</p> <p>Walks a straight line _____</p> <p>Skips in rhythm _____</p> <p>Hops _____</p> <p>F. Emotional Development</p> <p>Aware of the feelings of others _____</p> <p>Enjoys school & is usually happy _____</p> <p>Not excessively shy _____</p> <p>Not excessively aggressive _____</p> <p>Accepts change w/reasonable explanation _____</p> <p>Seeks adult help when needed _____</p> <p>Assumes responsibility _____</p>
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Part II: Please describe any special needs and/or special talents of this child. (Feel free to use the back of this form, if needed.) _____

Name: _____ Position: _____ Date: _____

Name of School: _____ Phone: _____

Return this Evaluation Form in the enclosed envelope directly to:

Office of Admissions
 East Texas Christian Academy
 2448 Roy Road
 Tyler, Texas 75707