

Austin Jewish Academy
Teacher Impressions Form
Grade 1 through 5 Applicant

Name of Student: _____

Enrolling Year: _____ Enrolling Grade: _____

Dear Educator,

The above student has applied to Austin Jewish Academy. AJA is a coeducational Jewish Day School for students who are well motivated and are of good character. Your completion of this evaluation is extremely helpful. It is important to all of us that the child's next school placement be an appropriate one for both the student and the family. We appreciate your taking the time and effort to provide us with this important information. Your judgments are used solely for the admissions process and are held in the strictest confidence. Kindly return this form by February 4, 2019. Fax to (512) 735-8351, scan and email it to admissions@austinjewishacademy.org, or mail it directly to AJA in the envelope provided.

Thank you for your cooperation and for the comments you will provide.

Name of Teacher: _____ Current School Phone: (____) _____

Current School: _____

Current School Address: _____

City: _____ State: _____ Zip Code: _____

In what grades/subjects do you or did you teach this child? _____

How long have you known this applicant? _____

Today's Date: _____



(Teacher Impressions, Cont.)

Please complete the following by checking the appropriate rating.

Approach to Learning	Excellent	Good or Above Average	Fair or Average	Limited or Poor
Motivation				
Study habits				
Planning & organizational skills				
Ability to work in a group				
Ability to work independently				
Participation in discussions				
Critical thinking				
Problem-solving				
Ability to express ideas orally				
Use of time				
Attention span				
Listening skills				
Completing assignments on time				
Leadership potential				
Initiative				
Creativity				
Responsibility				
Attendance				
Punctuality				

Language, Literature, Math and Scientific Thinking	Excellent	Good or Above Average	Fair or Average	Limited or Poor
Grasps new concepts with relative ease				
Grasps science concepts				
Reading for pleasure				
Reading comprehension				
Written expression/content				
Written expression/mechanics				
Mathematical ability				
Vocabulary				

(Teacher Impressions, Cont.)

Social Emotional	Excellent	Good or Above Average	Fair or Average	Limited or Poor
Following a series of directions				
Seeking help when needed				
Imagination				
Maturity				
Integrity				
Initiative				
Stability				
Sense of humor				
Self confidence				
Consideration of others				
Social adjustment with peers				
Respect of authority				
Response to criticism				
Appropriate handling of anger				
Self -control				
Following classroom rules and routines				

Family Information	Excellent	Good or Above Average	Fair or Average	Limited or Poor
Open communication with your school				
Participation in school functions				
Cooperation with school rules and policies				
Participation in child's education				
Has realistic expectations for child				

Kindly respond to the following.

1. Are there any academic concerns? _____

2. Are there any social or emotional concerns? _____

3. Are there any disciplinary concerns? _____

4. Are you aware of any health or medical issues? _____

5. Describe the student's personality: _____

6. What are the student's strengths? _____

7. What are the student's weaknesses? _____

8. Do you feel this child is well prepared for the enrolling grade? (See page 1) _____
9. Does the applicant have an IEP, 504, or Service Plan? _____
10. Are there other comments you have regarding this student? _____

If there is any additional information that would be better conveyed in a phone conversation, please indicate so and we will be glad to contact you. YES _____ NO _____

