

Eton School Teacher Questionnaire

Lower Elementary Applicants (1st-3rd grade)

Message to Parents: Please give this form to your child's teacher. In order to assure confidentiality, request that the teacher return it directly to the school.

Student: _____

Message to Teacher: This child has applied to Eton School. Your input will provide helpful information on how this child is in his/her current school environment. **Your comments will be held in strict confidence.** Thank you for your participation in this important process Please return form by **February 1** to:

Eton School 2701 Bel-Red Road, Bellevue, WA 98008, Attn: Admission Office

Teacher: _____ School: _____

How long and in what capacity have you known this student?

Please evaluate this student's achievement/abilities in the following areas: (4 is highest)

Reading	1	2	3	4
Language Arts	1	2	3	4
Mathematics	1	2	3	4
Creativity	1	2	3	4
Organization	1	2	3	4
Desire to go beyond minimum Expectations in assigned work	1	2	3	4
Day-to-day quality of work	1	2	3	4
Work/study habits:				
Able to work independently	1	2	3	4
Completes home assignments	1	2	3	4

Does this student have any learning disabilities, social/emotional adjustment difficulties or any other problems that can affect his/her performance in the classroom? Please explain.

Please make any further comments you think might be helpful in judging this applicant's adaptability to our Montessori program.