

Lower School (K – 5) Teacher Questionnaire

This questionnaire is designed to assist us in determining if / how this student might fit into our classroom and school environment. Your responses will be kept confidential and will not become a part of the student's permanent records. Thank you in advance for answering the questions below and assisting us in the application process.

Child's Name: _____ Grade Applying For: _____

Child's Current School: _____ Current Grade: _____

How academically prepared is this child for the grade in which they are applying?

Not Prepared	Somewhat Prepared	Adequately Prepared	Well Prepared	Exceptionally Prepared
1	2	3	4	5

Comments:

How well does this child manage himself / herself behaviorally?

Poorly		Adequately		Exceptionally
1	2	3	4	5

Comments:

How well does this child socially interact with peers?

Poorly		Adequately		Exceptionally
1	2	3	4	5

Comments:

Hope Academy

How supportive and involved are this child's parents?

Not At All Involved	Somewhat Involved	Average Involvement	Often Involved	Highly Involved
1	2	3	4	5

Comments:

Please rate this child's English proficiency:

Poor		Adequate		Exceptional
1	2	3	4	5

Does this child have an IEP, 504 Plan or receive Title I, Title III, counselor visits, etc.?

Yes No

If yes, please explain:

Please provide other comments that can help us determine if this can be a mutually beneficial fit.

PLEASE PRINT CLEARLY

School: _____

Teacher Name: _____

Phone Number: _____ Email: _____

Signature: _____ Today's Date _____

Please return this completed recommendation to:
Hope Academy
2300 Chicago Avenue, Minneapolis, MN 55404
Phone: 612-540-2013 - Email: admission@hopeschool.org