



**Sacred Heart
Cathedral School**
Faith · Family · Future

Parent Evaluation Form Part 1

***Please complete if applying to Grades 1 - 8**

Name of Applicant: _____ Grade: _____ Year: _____

Dear Parents:

Please complete both sides of this form and return it to us so that we may better evaluate and place your child at Sacred Heart Cathedral School.

1. Is your child in a program for the gifted/talented? _____
2. Is your child in any resource (remedial) classes? _____
Should he/she be considered for such? _____
3. Has your child been tested for A.D.D. or A.D.H.D.? _____
If yes, when? _____ Outcome of the testing: _____
If not, should he/she be considered for such? _____
4. Has your child ever been dismissed or suspended from school? _____
If yes, when? _____ For what reason(s)? _____

5. Does your child have any public or school involvement with drugs or alcohol? _____

6. Your child's favorite class and why? _____
7. Your child's least favorite class and why? _____
8. Favorite activities outside school _____

Parent Evaluation Form Part 2

***Please complete if applying to Grades 1 - 8**

Please evaluate your child in the following areas by placing a check mark in the appropriate column:

	ABOVE AVERAGE	GOOD	FAIR	NEEDS IMPROVEMENT
Organization and use of time				
Quality and consistency of academic work				
Eagerness to take on responsibilities				
Social and emotional maturity				
Compatibility with peers				
Openness with adults				
Leadership				
Sense of humor				
Study habits				
Reaction to criticism				
Involvement in school and community activities				
Self-esteem (self-respect)				