



GOOD SHEPHERD CATHOLIC SCHOOL

148 S. Linden Drive, Beverly Hills, CA 90212

Call: 310.275.8601 ♦ Fax: 310.275.0366

www.goodshepherdbeverlyhills.com

Registration Evaluation Form

Confidential for Principal

Please send directly to Good Shepherd Catholic School

Entering 6th, 7th and 8th Grade

Your judgments are used solely for the administration process and are held in the strictest confidence.

We thank you in advance for the help your comments provide.

Name of Student: _____ Date of Birth: _____

School Currently Attending: _____ School Phone: _____

Address: _____ City: _____ Zip: _____

Date of Enrollment: _____ Today' Date: _____ **Entering Grade:** _____

Please evaluate the student for the following:

	Below Average	Average	Above Average
Language Arts			
Basic Mechanics			
Sentence Structure			
Grammar			
Critical Thinking			
Mathematics			
Basic Skills			
Analytical Ability			
Word Problems			

Academic and Character Information:

	Below Average	Average	Above Average
Motivation			
Responsibility			
Relationship with Peers			
Leadership Abilities			
Integrity			
Cooperation			
Work Habits / Effort			
Behavior			

List three words that describe this student: _____

List any special needs that this student requires: _____

Comments: _____

Describe the parent's involvement in student's education: _____

Number of times absent (last semester): _____ Number of times absent (last semester): _____

Print your Name: _____ Signature: _____

Your Title / Position: _____

Your Relationship to the Student: _____