



All Saints Catholic School

Act Honorably. Live Virtuously. Seek Truth.

Middle School Confidential Teacher Evaluation

Parents: Please complete the applicant information and forward this document to your child's teacher. This evaluation is confidential and will only be released to the admissions committee of All Saints Catholic School.

Signature of Parent or Guardian: _____

Name of Applicant: _____ Grade for which applying: _____

Dear School Official/Teacher: The student listed above is applying for admission to All Saints Catholic School in Dallas, TX. This is a confidential recommendation. If you do not wish to complete this form, but would be willing to discuss the student personally, please sign and list a contact phone number or your email address. If you have any questions, please contact the Admissions Coordinator, Viviana Stanford, at 214.217.3303.

Area	Excellent	Good	Satisfactory	Marginal	Not Observed
Respect for Authority					
Integrity					
Cooperation with Classroom Policies					
Self Confidence					
Emotional Maturity					
Peer Relations					
Academic Motivation					
Diligence					
Consistency					
Participation					
Intellectual Ability					
Understanding of Concepts					
Critical Thinking					
Written Expression of Ideas					
Oral Expression of Ideas					

During which school years did you teach this student? _____

Please comment on any limitations, special needs, or talents which may be beneficial for us to know in teaching this student.

Applicant's Current School _____

Number of Years Attended _____ I have known the Applicant for _____ years.

Print Teacher's Name _____

Teacher's Signature _____ Date: _____

School Officials, please send the evaluation form directly to our Admissions Office.

Mail: 7777 Osage Plaza Pkwy, Dallas, TX 75252

Email: VStanford@AllSaintsK8.org

Phone: 214.217.3303

Fax: 214.217.3339

Thank you for your assistance.

All Saints Catholic School Admissions Office