

HAWAII ASSOCIATION OF INDEPENDENT SCHOOLS
 TEACHER REFERENCE REPORT
 (Please return between December 31 and January 31)

Applicant for Grade _____

Last First Middle

Class Level: Accelerated _____ High _____ Average _____ Low _____ Heterogeneous _____

Please check the appropriate rating (√). N/A (not applicable) may be used in areas where there is insufficient data.

Motivation (effort, drive)	occasional	moderate	good	maximum
Ability to work alone	needs help frequently	needs help occasionally	frequently works well	
Leadership potential	A follower	leads when put in position	seeks opportunities and uses them well	natural
Classroom conduct	occasional misconduct	usually good behavior	good conduct	
Cooperates with adults	sometimes	usually	nearly always	
Personal/social adjustment	relates poorly with others	fluctuating relationship with peers; generally happy person	healthy self image; healthy peer relationships	
Homestudy habits	never completes assignments	sometimes misses assignments	completes assignments	does more than expected
Ability to work in a group	sometimes able to cope	usually effective	frequently works well	
Participation in discussion	contributes when called on	volunteers occasionally	joins in readily	
Ability to express ideas orally	has some difficulty	good	exceptionally good	
Use of time	occasionally well	usually well	often effectively	
Organization of work	fair	average	good	excellent
Follows directions	needs much explanation	needs occasional help	responds quickly	
Consideration of others	occasionally considerate	usually	very thoughtful	
Initiative (wholesome)	sometimes	occasionally	frequently	
Fulfills responsibilities	sometimes	usually	nearly always	
Uses suggestions or corrections	sometimes	occasionally	frequently	

Observations which may help us know this youngster are especially appreciated:

Teacher's Signature _____ Print or Type Name _____

Subject and/or Grade _____ Date _____

School _____

**Soto Academy
1708 Nuuanu Avenue
Honolulu, Hawaii 96817**

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(Due between December 31 and January 31)

TO THE TEACHERS:

This student is an applicant for admission to Soto Academy. We regard your professional evaluation of this child as a part of the criteria used in considering his/her application. Any information you supply will be held in strict confidence. Please return this directly to Soto Academy.

TO THE PARENT/GUARDIAN:

Please complete the first line on the reverse side. Please print or type.

Provide a STAMPED ENVELOPE addressed to Soto Academy Office with each Teacher Reference Report. These reports will be held in strict confidence and be used only for admissions purposes.

"I hereby give my permission to release the information indicated on the Teacher Reference Report regarding my child, _____, for the purpose of admission to Soto Academy."

Signature of parent/guardian

Date

Address