

# CONFIDENTIAL TEACHER OBSERVATION FOR JUNIOR K/KINDERGARTEN

**Crane Country Day  
Montessori Center**

**El Montecito School  
Santa Barbara Christian**

**Laguna Blanca  
Santa Barbara Montessori**

**Marymount of Santa Barbara (JrK/K)  
The Family School**

Applicant's name \_\_\_\_\_ Candidate for JK/K for Fall \_\_\_\_\_  
(circle one)

I waive my right of access and that of my child to this recommendation form. \_\_\_\_\_  
Parent signature

**To the teacher:** This recommendation will remain confidential and will not become part of the student's permanent record. Your input is a vital part of our process. Please complete this form carefully and thoroughly. The above schools often share applicants. In order to make the recommendation process easier for you, this form will be accepted by all seven schools. Please photocopy this completed recommendation form to use in the event that the student has applied to more than one of these schools.

How long have you known the student? \_\_\_\_\_ Days per week \_\_\_\_\_ Half or full day \_\_\_\_\_

What three (3) adjectives would you use to describe this student \_\_\_\_\_

## **SOCIAL/EMOTIONAL DEVELOPMENT**

	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Nearly Always</b>	<b>No Basis for Judgment</b>
Works and plays cooperatively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Works independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Accepts responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Exhibits self-control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Effectively communicates wants and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Shows consideration for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Demonstrates a good attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Resolves conflicts appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Transitions easily between activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>

## **WORK HABITS/ATTITUDES**

	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Nearly Always</b>	<b>No Basis for Judgment</b>
Shows initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Listens attentively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Cares for materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Shows an active interest in classroom activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Stays on task	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Completes tasks in a timely fashion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Follows classroom routine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>

*Please complete reverse side*

**ACADEMIC QUALITIES**

	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Nearly Always</b>	<b>No Basis for Judgment</b>
Exhibits intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Enjoys stories read aloud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Recalls specific story details	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Exhibits problem solving abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Communicates ideas effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Recognizes differences in size, shape & quantity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Exhibits ability to count objects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Enjoys new challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>

**PHYSICAL DEVELOPMENT**

	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Nearly Always</b>	<b>No Basis for Judgment</b>
Demonstrates small muscle control/coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Demonstrates large muscle control/coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Uses appropriate language and vocabulary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Uses age appropriate speech articulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>

**ADDITIONAL INFORMATION**

	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Nearly Always</b>	<b>No Basis for Judgment</b>
Parent cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>
Parent participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>

How does this child respond to frustration?

How does this child handle conflict with peers?

In what situations does this child become excitable, upset, or apprehensive?

List any special or unusual circumstances (positive or negative) which may be relevant to the student's performance in school.

**RECOMMENDATION FOR ADMISSION**

	<b>Not Ready</b>	<b>Ready with Reservation</b>	<b>Definitely Ready</b>
For cognitive potential/readiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For social/emotional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there any additional information that can be better conveyed in a phone conversation?  Yes  No

**TEACHER INFORMATION**

Name of person completing this form (please print) \_\_\_\_\_

School name \_\_\_\_\_ Phone number \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

We sincerely appreciate your cooperation and candor. To ensure confidentiality, please return this form directly to the school.