

Please comment on:

Study habits _____

Motivation _____

Organization of time and work _____

Curiosity _____

Attention span _____

Ability to express ideas orally _____

Ability to work in a group _____

Creativity _____

Reading for pleasure _____

Attendance pattern _____

Parent cooperation _____

Parent involvement in school affairs _____

We would appreciate additional comments and observations concerning the strength, weaknesses, health, or any special needs or concerns of this student and family.

Your name _____ Date _____ Telephone _____

School _____

Address _____