



2013-2014 STUDY FRIENDS TEACHER EVALUATION FORM

Today's Date: _____ Student Name: _____

Student's School: _____ Grade: _____

Referring Teacher's Name (Please Print): _____

Did the student's tutor contact you? YES NO

Current Grade in Math: A B C D F

Current Grade in English: A B C D F

Current Grade in History: A B C D F

Current Grade in Science: A B C D F

How would you assess his/her study skills?

0 1 2 3 4 5 6 7 8 9 10
Poor Excellent

How would you assess his/her classroom participation?

0 1 2 3 4 5 6 7 8 9 10
Poor Excellent

How would you assess his/her attendance?

0 1 2 3 4 5 6 7 8 9 10
Poor Excellent

How would you assess his/her self-esteem?

0 1 2 3 4 5 6 7 8 9 10
Poor Excellent

How would you assess his/her organization?

0 1 2 3 4 5 6 7 8 9 10
Poor Excellent

Please scan and email forms for Eagle or Gypsum students to kiraliteracy@evld.org
and for Vail, Avon, or Edwards students to sloantheliteracyproject@evld.org

Please comment on your experience with our program on the back of this form.