



ISAAGNY Form Instruction Sheet

We greatly appreciate your taking the time to complete this form, as we recognize that this is an added responsibility. It provides one way of getting to know the student and is reviewed with the understanding that students are constantly changing and developing. We place particular value on your observations of classroom behavior.

Preparers and recipients are expected to maintain the information in strict confidence. Preparers and recipients are prohibited from sharing this information with parents/guardians/students, and ISAAGNY does not provide this information to parents/guardians/students unless required by subpoena or court order.

This instruction sheet is designed to provide guidance as you complete the form. If you have any questions, please feel free to contact inquiry@isaagny.org. **Do not send completed forms to inquiry@isaagny.org, as we do not process or forward paperwork.** All completed forms should be sent directly to the school(s) to which each student is applying.

We recognize that [ISAAGNY](http://isaagny.org) (Independent School Admissions Association of Greater New York) is made up of many member schools, each of which has its process and application software platform. As a result, you may receive multiple requests to complete the same form. Please check with the applicant's family if you have any questions about where the forms need to be submitted.

- We suggest you submit this form no earlier than November 1 so that you have time to get to know the student before completing this form. Your assessment should be based on who they are in your class this year.
- If you cannot speak to the student's current performance or are not currently teaching the student, you are likely not the appropriate person to be completing the form (the exception is those filling out the General Recommendation form for Middle/Upper School applicants).
- When completing the form, please keep in mind the student's relative age within their class cohort.
- Please provide a candid assessment of the student's ongoing development, strengths, and areas with room for improvement.
- If you are unsure of the answer to a question, please indicate that and add more notes at the end of the section.
- We highly recommend saving a copy of the completed version of this form just in case there are technology glitches.
- The comment boxes are very helpful to admission offices. Please provide specific examples. We would appreciate 3-4 sentences in each comment box. Please focus your comments on the most recent observations of the child's progress, skills, and development. Include any useful anecdotes that would help to highlight the child's strengths and personality.

We greatly appreciate your taking the time to complete this form. It provides one way of getting to know the student and is reviewed with the understanding that students are constantly changing and developing. We place particular value on your observations of classroom behavior and your descriptive comments in each area. Preparers and recipients are expected to maintain the information in strict confidence and to refrain from sharing it with students, parents, or guardians.

Child's Name: _____ Name usually called: _____

Birthdate: _____ Current School: _____

Current School Address: _____

Current School Phone: _____ Date child entered school: _____

Current Teacher: _____ Date of this report: _____

Name, Email and Phone of person completing this report: _____

How long have you known this student? _____

How much time per week is this student in your class? _____

Student's primary language: _____

Languages spoken at home: _____

List six adjectives to describe this student:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

Student Profile

To help us compile a profile of this student, please check the following categories, adding comments wherever possible:

Sense of responsibility	<input type="checkbox"/> is responsible	<input type="checkbox"/> is usually responsible	<input type="checkbox"/> is sometimes responsible	<input type="checkbox"/> is rarely responsible
Comments:				
Consideration for others	<input type="checkbox"/> is very considerate	<input type="checkbox"/> is usually considerate	<input type="checkbox"/> is inconsiderate	
Comments:				
Leadership skills	<input type="checkbox"/> exhibits excellent skills	<input type="checkbox"/> exhibits good skills	<input type="checkbox"/> exhibits average skills	<input type="checkbox"/> exhibits poor skills
Comments:				
Self confidence	<input type="checkbox"/> has a healthy self image	<input type="checkbox"/> needs some support	<input type="checkbox"/> seems overly confident	<input type="checkbox"/> has a poor self image
Comments:				
Sense of humor	<input type="checkbox"/> is highly developed	<input type="checkbox"/> is good	<input type="checkbox"/> is fair	<input type="checkbox"/> is poorly developed
Comments:				
Peer relationships	<input type="checkbox"/> enjoys good relationships	<input type="checkbox"/> has satisfactory relationships	<input type="checkbox"/> has occasional problems	<input type="checkbox"/> relates poorly
Comments:				
Relationship with adults	<input type="checkbox"/> is comfortable	<input type="checkbox"/> is uneasy	<input type="checkbox"/> is dependent	<input type="checkbox"/> is uncooperative
Comments:				

	Outstanding	Excellent	Above Average	Average	Below Average
Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization of time and work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express ideas in writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express ideas orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Analysis of Performance

	Surpasses	Meets Expectations at this Level	Falls Below
Math			
Basic Operations— If Applicable			
Addition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtraction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multiplication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Division	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solving Word Problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math Concepts			
Place Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rounding Numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Order of Operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Surpasses Meets Falls Below
Expectations at this Level

Fractions

Adding Fractions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adding Mixed Numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtracting Fractions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Different Denominators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multiplying Fractions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dividing Fractions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Language Arts

Basic Skills

Vocabulary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grammar/Usage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Syntax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Composition Skills

Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clarity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Originality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reading

Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Powers of Analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

General

Class Participation Frequency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Assignment Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This student's work level is about the ___ upper ___ middle ___ lower third of the class.

In what area/s does this student show particular strength? _____

Does the student need special support or help in any area/s? _____

Our school endeavors to know a child as completely as possible. Your comments help the Admission Committee determine if our school will meet the needs of this applicant. Please share any additional information we should consider in our evaluation process (e.g., parent participation, child's home life, school attendance, etc.).

Overall, I recommend this student:	<input type="checkbox"/> Enthusiastically	<input type="checkbox"/> Strongly	<input type="checkbox"/> Fairly strongly	<input type="checkbox"/> Without enthusiasm
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Best number to call should the Admission Office(s) have questions: _____

Evaluator's signature: _____ Date: _____

Evaluator's position: _____