



St. Joseph School

Referral Form (Grades 2-8)

This form should be sent directly to the Enrollment Office at St. Joseph School.

Mail – 105 Church Lane, Cockeysville, MD 21030 / Fax – 410-628-6814 / Email – ksmith@sjpray.org

Name of Student _____ Current School _____ Present Grade Level _____

Placement? honors standard other _____ Textbook(s) _____

Evaluator's Name _____ Position _____
Please print. If teacher, please list subject area.

Signature _____ E-mail _____

Date _____ Telephone _____

The first words that come to mind when I think of this student are _____.

Would you be willing to discuss this child by telephone if we have further questions? Yes No

Is there information about this child that would be better communicated by telephone? Yes No

I have known this student for _____ years, _____ months. Attendance is regular not regular.

Please circle the words that describe this student.					
aggressive	conscientious	energetic	kind	organized	responsible
assertive	dishonest	follower		overprotected	restless
anxious	disobedient	honest	leader	passive	self-centered
articulate	distractible	humorous	loner	passive-resistant	self-disciplined
cheerful	distracting	irresponsible	manipulative	perfectionist	shy
compassionate	easily discouraged	irritable	motivated	popular	social
confident	easily frustrated	impulsive	negative	positive	vivacious
Other:					

Please note any special attributes of this student that would help us to better understand him or her (e.g., English as a second language, special talent in arts or athletics, etc.).

Please comment on the student-parent relationship.

Please describe the parents' relationship with teachers and the school.



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Academic Ability	Outstanding	Above Average	Average	Below Average
Verbal ability				
Mathematical ability				
Creative ability				
Intellectual curiosity				
Ability to grasp new concepts				
Please comment on this child's academic strengths and weaknesses.				

Classroom Performance	Outstanding	Above Average	Average	Below Average
Classroom achievement				
Participation in discussions				
Writing mechanics				
Quality of written ideas				
Oral expression				
Work habits				
Ability to follow directions				
Preparation for class				
Please comment on this child's learning style. Please also note any special needs and any observed discrepancies between academic ability and classroom performance.				

School Behavior	Outstanding	Above Average	Average	Below Average
Motivation				
Ability to work in a group				
Ability to work independently				
Response to suggestions and corrections				
Willingness to seek needed help				
Attention span				
Interaction with peers				
Respect to others				
Conduct				
Please comment on any noteworthy aspect of the student's school behavior.				

Personal Abilities	Outstanding	Above Average	Average	Below Average
Maturity for grade				
Maturity for age				
Perseverance				
Self-confidence				
Please comment on this student's social and emotional development.				

For a School Administrator: Has the family satisfied all financial obligations to your school? Yes No Initials _____

If you have any questions or concerns, please contact the principal or assistant principal at St. Joseph School, 401-683-0600 x3.

Thank you.

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