



St. Joseph School

Referral Form (Grades K-1)

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 _____ with _____ other students in the class, _____ days a week, _____ hours a day.

Attendance is regular not regular.

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

Signature _____ E-mail _____

Date _____ Telephone _____

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.

Please circle the words that describe this student.

aggressive	conscientious	energetic	influential	organized	responsible
assertive	dishonest	follower	kind	overprotected	restless
anxious	disobedient	honest	positive leader	passive	self-centered
articulate	distractible	humorous	negative leader	passive-resistant	self-disciplined
cheerful	distracting	irresponsible	loner	perfectionist	shy
compassionate	easily discouraged	irritable	manipulative	popular	social
confident	easily frustrated	impulsive	motivated	positive	vivacious
			negative	rambunctious	well-liked
Other:					

Please comment on the child-parent relationship.

Please describe the parent's relationship with the school.

In your opinion, what are the child's particular strengths?

In your opinion, what are the child's particular weaknesses?

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.).



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Readiness Skills for Reading, Writing, and Computation	Notably Advanced	Age Advanced	Progressing Towards Age Appropriate	Possible Area of Concern
Ability to listen in a group				
Contributions to discussions				
Ability to follow directions				
Ability to work cooperatively				
Respect for classroom routines				
Ability to complete tasks				
Ability to focus on one task				
Ability to transition between tasks				
Response to correction				
Willingness to try new activities				
Ability to initiate activities				
Ability to solve problems				
Ability to express thoughts and ideas				
Please comment on this child's intellectual development (e.g., receptive language development, visual and auditory discrimination).				

Social & Emotional Development	Notably Advanced	Age Advanced	Progressing Towards Age Appropriate	Possible Area of Concern
Comfort with peers				
Comfort with adults				
Ability to work independently				
Cooperation in classroom activities				
Cooperation in play				
Initiation of play activities				
Sharing				
Use of imagination				
Capacity to lead				
Capacity to follow				
Purposeful use of materials				
Please comment on the child's social development (e.g., degree of aggression or passivity, peer relationships, adult support needed, level of play).				
Please comment on this child's emotional development (e.g., self-image, ability to deal with conflict and frustration).				

Physical Development	Notably Advanced	Age Advanced	Progressing Towards Age Appropriate	Possible Area of Concern
Small muscle control & coordination				
Large muscle control & coordination				
Articulation				
Additional comments:				

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, 410-683-0600 x3.

Thank you.

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