

Parent/s: Please give this form to your child's current teacher and ask that it be completed and mailed as soon as possible.

School of the Cathedral of Mary Our Queen Referral Form

All information on this form will be held in the strictest confidence and the school will not share information provided by you with the student or parent/guardian. We appreciate your candor.

Name of student _____ Present grade level _____

Current School _____

Name of evaluator (please print) _____

Position at school _____

What are the first words that come to mind when you think of this student?

ACADEMIC QUALITIES

	Outstanding	Good	Average	Below Average	N/A
Academic ability	_____	_____	_____	_____	_____
Academic achievement	_____	_____	_____	_____	_____
Self-motivation	_____	_____	_____	_____	_____
Study habits	_____	_____	_____	_____	_____
Classroom work habits	_____	_____	_____	_____	_____
Preparation for class	_____	_____	_____	_____	_____
Ability to work in group	_____	_____	_____	_____	_____
Ability to work independently	_____	_____	_____	_____	_____
Intellectual curiosity	_____	_____	_____	_____	_____
Writing ability	_____	_____	_____	_____	_____
Oral expression	_____	_____	_____	_____	_____
Follows directions	_____	_____	_____	_____	_____
Ability to grasp new concepts	_____	_____	_____	_____	_____
Seeks help when needed	_____	_____	_____	_____	_____
Response to suggestions and corrections	_____	_____	_____	_____	_____

PERSONAL QUALITIES

	Outstanding	Good	Average	Below Average	N/A
Maturity	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____
Consideration for others	_____	_____	_____	_____	_____
Self-confidence	_____	_____	_____	_____	_____
Integrity	_____	_____	_____	_____	_____
Conduct	_____	_____	_____	_____	_____
Self-control	_____	_____	_____	_____	_____
Parental support	_____	_____	_____	_____	_____

Circle the words that best describe this student:

aggressive	anxious	articulate	cheerful	disobedient	easily discouraged
helpful	follower	influential	perfectionist	organized	passive-resistant
over-protected	motivated	shy	responsible	social	self disciplined
well-liked	positive leader	honest	conscientious	vivacious	easily frustrated
irritable	negative leader	confident	other _____		

What is the class size and student/teacher ratio at your school? _____

PLEASE COMMENT BRIEFLY ON EACH OF THE FOLLOWING IN REGARD TO THE CHILD:

Are there significant weaknesses, problems or strengths of which we should be aware?

Social development (peer relationships, aggression, or passivity)

Child's relationship with parents

Parents' relationship with school

Evaluator's signature _____

Telephone number _____

Date _____

Please complete and mail this form to:

Admissions

School of the Cathedral of Mary Our Queen

111 Amberly Way

Baltimore, MD 21210

(Questions? Please contact the Director of Admission, Mrs. Fiona Diemer, at fdiemer@cmoq.org or 410-464-4117.)