



KAETSU ARIAKE Junior & Senior High School
2-16-1 Shinonome Koto-ku Tokyo 135-8711 JAPAN
TEL: +81-3-5564-2111
FAX: +81-3-5564-2160

STUDENT EVALUATION SHEET

To Student; (学年、名前、保護者名を記入してあなたを良く知っている先生に渡してください。)

Please print out a paper copy of this form.

Print your name and parent's name in the space below and give this form to your Principal, Counselor, English teacher or Homeroom teacher.

Grade: _____ Name of Student: _____
Name of Parent: _____

To Principal/Counselor/Teacher;

Please **complete the following form by hand, sign and date it**, and pass it to the applicant. The applicant will be responsible for sending this as part of their admissions paperwork. It will be used in the overall student evaluation but will not become part of the student's permanent record. We thank you for your cooperation and candor.

Name and Title of Principal/Counselor/Teacher; _____

Academic and Personal Qualities for This Student

1. How long have you known this student? _____
2. How many students are in the applicant's entire grade? _____
3. What are the first three words that come to mind to describe this student? _____

4. Has this student ever been a disciplinary problem? Yes No
If yes, briefly explain, noting any disciplinary action taken. _____

5. Has this student advanced to the next grade annually? Yes No
If no, please explain; _____

6. How would you rank this student in the following areas compared with students of the same age?

	Truly Outstanding (Top 5%)	Excellent	Good	Average	Below Average
<input checked="" type="checkbox"/> Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Potential for Growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Summary Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. What are this student's strengths? _____

8. In which areas does this student need improvement? _____

9. Does this student attend class regularly? Yes No

10. Is there a problem with tardiness? Yes No

If so, please explain; _____

11. How well does this student accept advice or criticism? _____

12. If this student handed in a paper late, it would probably be because the student;

Procrastinates Has many other activities Student's work is never late

Strives for perfection of expression Lost the rough draft

Other, please explain; _____

13. Which words best describe this student's thinking?

Imitative Independent Creative Other; _____

14. Does this student have any particular interests or affinities you would like to share with us?

15. Is there any other information that would be helpful to us in evaluating the ability of this student to perform at KAETSU ARIAKE Junior & Senior High School?

School Relationship for Parents

Parents are important part of our relationship with this student. Please share with us any thoughts you have regarding this family.

1. Are you aware of any family circumstances that affect this student's life at school?

2. Which word(s) best describe the parents in regard to their child?

Supportive Demanding Controlling Indifferent

Other; _____

Additional Comments if any;

If we have additional questions, may we contact you? Yes No

If yes, email; _____ @ _____

Signature; _____ Date; _____

Thank you very much for your time and the information you have provided.

海外在留証明書

年 月 日

かえつ有明中・高等学校
学校長 殿

会社または機関所在地：

会社または機関名：

役職名及び氏名：

印

下記の者は家族（出願者）を伴い、下記の通り海外に在留していたことを証明します。

記

1 在留期間等

(1) 保護者 _____年____月____日より _____年____月____日まで

(2) 出願者 _____年____月____日より _____年____月____日まで

(3) 海外在留地名

国名 _____

都市名 _____

2 保護者・出願者氏名

保護者氏名 _____

出願者氏名 _____ 保護者との続柄 _____