

# Teacher Evaluation



**Enrollment Services** 400 South Orange Avenue, South Orange, New Jersey 07079-2680  
 1-800-THE HALL (843-4255) E-mail: [thehall@shu.edu](mailto:thehall@shu.edu) Web: [admissions.shu.edu](http://admissions.shu.edu)

## TO BE COMPLETED BY THE APPLICANT

Applicant's Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address (Number & Street) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  Male  Female **Social Security Number** \_\_\_\_ - \_\_\_\_ - \_\_\_\_

month    day    year

## TO BE COMPLETED BY THE APPLICANT'S TEACHER

The student named above has applied for admission to Seton Hall University. We ask for your assistance in evaluating this student. Your candid feedback will be very useful in helping us determine the student's eligibility for admission. Please place this evaluation in a sealed, signed envelope, and return it to the student's guidance counselor, or mail it directly to Seton Hall University at the address above. Feel free to copy this form or attach additional sheets. Thank you for your assistance.

### Student Evaluation

*(Please respond candidly to each section by checking the appropriate box for each category.)*

	No Basis for Judgment	Below Average	Average	Good	Excellent (Top 10%)	Outstanding (Top 2-3%)
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Ethic & Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desire to Work to Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work in Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Recommendation for Admission

*(Please indicate your level of recommendation for admission.)*

	Poor	Fair	Strong	Enthusiastic	Unable to Comment
Based on Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Character & Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Effort & Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Based on Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments**

*(Please feel free to attach a recommendation.)*

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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Name \_\_\_\_\_ Title \_\_\_\_\_

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High School Name \_\_\_\_\_

( \_\_\_\_\_ )

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Phone \_\_\_\_\_

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How long have you know the applicant? \_\_\_\_\_

