
Grades 6th, 7th, 8th (11-14 years olds)
Teacher comment form for:



Established 1972

Subject area (please check box)

Math Teacher

Language Arts

Social Sciences

(Child's name)

Child's current age: _____

Name of teacher(s): _____ Position: _____

School Name: _____ Date: _____

School Address: _____ State: _____ Zip Code: _____

Phone (school): _____

Dear Educator:

The above named child has applied for admission to Wingra School. To help us make admissions and placement decisions that best serve the child, we would greatly appreciate information from you about previous school experiences. Please take some time to answer the questions below. We value your input and appreciate your time and assistance.

Thank you,

Paul Brahce, Head of School

1. Please state the age, dates, and capacity in which you worked with this child.

Ages _____ to _____ Dates _____ to _____

Capacity:

2. Please comment specifically on the child's development in your academic area.

3. Has there been any undiagnosed or diagnosed learning disability? Have you considered having an assessment done? Please comment.

