ST. BEDE CATHOLIC SCHOOL

Kindergarten Referral

Teacher Reference for Application to St. Bede Catholic School Kindergarten



	has applied for admission at St. Bede Catholic
School's Kindergarten. In order that we may have some understanding of each child's abilities and needs, we would appreciate completion of this form for your student. In lieu of this form, we will also accept the common Kindergarten Evaluation form for the East Bay independent schools. This information is confidential and will not be placed in the child's school file. As a teacher who has recently worked with this child, your knowledge is valuable.	
You	Name: Date:
You	School Name:
Add	ess: City / Zip:
Phor	e:
Inclu	sive dates you taught this child:
1)	How does this child function cognitively in the classroom?
2)	How does this child function socially in the classroom with peers and adults? Please comment on the following: ability to separate easily form parent(s), ability to get along with peers, ability to accept limits, and ability to accept responsibility for behavior.
3)	Describe this child's attention span, independence, ability to focus, to follow directions, to listen attentively, and to use materials purposefully.

4)	Please describe this child's physical development: small muscle control and coordination, large muscle control and coordination, and speech development (articulation).
5)	Are there any other issues around this child's readiness for kindergarten?
6)	Please comment on the parents' support of the child's learning and their cooperation with the school.
7)	Please note any recommendations and additional information you would make concerning this child. Please include comments concerning any special needs of this child and/or family.
	Thank you for your time and assistance in completing this form. Please send to: St. Bede Catholic School – Kindergarten 26910 Patrick Avenue Hayward, CA 94544