

Caravel Academy

2801 Del Laws Road Bear, Delaware 19701



ROBERT C. PEOPLES
Founder

DOROTHY M. PEOPLES
President

JERRY LAMEY, Ed.D.
Head of School

Phone (302) 834-8938
Fax (302)834-3658
www.caravel.org

STUDENT EVALUATION ADMINISTRATOR OR COUNSELOR

Name of applicant _____ Current Grade _____

How long have you known this student and in what capacity?

What words would you use to describe this student?

How does this student's overall performance in school relate to his or her ability?

How well does this student work with other students and with adults?

To your knowledge, does this student have any special educational needs?

Please comment on this student's character and personality. You may want to discuss such things as maturity, peer relationships, sense of humor, and enthusiasm for learning. Please include any strengths and weaknesses that you feel should be noted.

Please fill out the checklist on the back, sign, and mail to: Caravel Academy, Attn: Admissions, 2801 Del Laws Road, Bear, DE, 19701 or fax to 302-834-3658. Thank you for taking your time to complete this evaluation.

Evaluator: _____ Title: _____

School: _____ Date: _____

A Prestigious Academy Program in a Country Setting

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Academic Evaluation

Please check the appropriate response

Academic Potential	Limited	Fair	Average	Good	Outstanding
Effort					
Study Habits					
Intellectual Curiosity					
Ability to work independently					
Use of time					
Follows directions					
Attention Span					
Creativity and Originality					

Personal Evaluation

Please check the appropriate response

Personal Characteristics	Limited	Fair	Average	Good	Outstanding
Integrity and Honesty					
Consideration of others					
Social adjustment with peers					
Classroom conduct					
Initiative					
Emotional Stability					
Self-Confidence					
Fulfills responsibilities					

If there is anything else you feel we should know about this student, please explain below.

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