



Independent School of Winchester

TEACHER EVALUATION 2017-18

PERFORMING ARTS TRACK

This form will not be shared with the applicant or his/her family.

Parents: please fill out the first two sections below.

Applicant:

Student's Full Name _____ Nickname _____

Birth date _____ Male ____ Female ____

Address _____

School attended by applicant: _____

Current Grade: _____

Teachers: please fill out the rest of this form.

Teacher Information

Teacher _____

School Name _____

Address _____

Dates _____

Questions *Please attach more sheets if necessary.*

What are this student's greatest strengths as an emerging performing artist?

What are the student's areas of challenge?

Has this student ever been involved in a disciplinary incident? If so, please explain. *Use additional sheets if necessary.*

I ___ would ___ would not recommend _____ for admission to ISW's Performing Arts Track.

Signature of teacher _____
Printed name _____ Date _____

Evening phone number _____ Please ___do ___do not call me.

Please send this recommendation to

The Independent School of Winchester
130 Carriebrooke
Stephens City, VA 22655

ISW admits students of any race, color, national origin, ethnic origin, religion, or sexual orientation to all the rights, privileges, programs, and activities generally accorded to students at the school. It does not discriminate on the basis of race, color, national origin, ethnic origin, religion, or sexual orientation in its administration of its educational policies, scholarship and loan programs, and athletic and other school-administered programs.