

2018-2019 Academic Year Common Teacher Referral Form For Children Applying to Early Childhood Programs through Fourth Grade

The schools listed have agreed to use this Common Teacher Referral Form which is required for children applying to Independent Schools of St. Louis (ISSL).

Directions:

- A release form, signed and dated by the parent(s) or legal guardian(s), should accompany this referral form. The information provided on this form will be kept in the **strictest confidence, will not be shared with parents** and is used only by the Admission Committee.
- Retain the **original form** for your files.
- Mail a **copy** of the form to the school requesting the information.
- If applicable, include any progress reports, school or health records with the referral form.
- **Return the form to the requesting ADMISSION OFFICE no later than ten (10) days from the date received.**

_____ Academy of the Sacred Heart 619 N. 2nd Street St. Charles, MO 63301	[P] 636-946-6127 [F] 636-949-6659
_____ Andrews Academy/Creve Coeur 888 N. Mason Road St. Louis, MO 63141	[P] 314-878-1883 [F] 314-878-0759
_____ Andrews Academy/Lake St. Louis 1701 Feise Road Lake St. Louis, MO 63368	[P] 636-561-7709 [F] 636-561-7725
_____ Central Christian School 700 South Hanley St. Louis, MO 63105	[P] 314-727-4535 [F] 314-727-8006
X _____ Chesterfield Day School 1100 White Road Chesterfield, MO 63017	[P] 314-469-6622 [F] 314-469-7889
_____ Chesterfield Montessori School 14000 Ladue Road Chesterfield, MO 63017	[P] 314-469-7150 [F] 314-469-7851
_____ City Academy 4175 N. Kingshighway Blvd St. Louis, MO 63115	[P] 314-382-0085 [F] 314-382-0228
_____ The College School 7825 Big Bend Blvd. St. Louis, MO 63119	[P] 314-962-9355 [F] 314-962-5078
_____ Community School 900 Lay Road St. Louis, MO 63124	[P] 314-991-0005 [F] 314-991-1512
_____ Forsyth School 6235 Wydown Boulevard St. Louis, MO 63105	[P] 314-726-4542 [F] 314-726-0112
_____ The Fulton School at St. Albans P.O. Box 78 123 Schoolhouse Road St. Albans, MO 63073	[P] 636-458-6688 [F] 636-458-6660

_____ Kirk Day School 12928 Ladue Road St. Louis, MO 63141	[P] 314-434-4349 [F] 314-434-0047
_____ Mary Institute and St. Louis Country Day School Admission Office 101 N. Warson Road St. Louis, MO 63124	[P] 314-995-7367 [F] 314-872-3257
_____ New City School 5209 Waterman Blvd. St. Louis, MO 63108	[P] 314-361-6411 [F] 314-361-1499
_____ Rohan Woods School 1515 Bennett Avenue St. Louis, MO 63122	[P] 314-821-6270 [F] 314-821-6878
_____ Rossman School 12660 Conway Road St. Louis, MO 63141	[P] 314-434-5877 [F] 314-434-1668
_____ Saul Mirowitz Jewish Community School 348 S. Mason Rd. St. Louis, MO 63141	[P] 314-576-6177 [F] 314-567-3624
_____ The St. Michael School of Clayton 6345 Wydown Boulevard St. Louis, MO 63105	[P] 314-721-4422 [F] 314-721-4448
_____ Villa Duchesne and Oak Hill School 801 S. Spoede Road St. Louis, MO 63131	[P] 314-810-3566 [F] 314-432-0199
_____ Visitation Academy 3020 North Ballas Road St. Louis, MO 63131	[P] 314-625-9103 [F] 314-432-7210
_____ The Wilson School 400 DeMun Avenue St. Louis, MO 63105	[P] 314-725-4999 [F] 314-400-5224

2018-2019 Academic Year

Common Teacher Referral Form For Children Applying to Early Childhood Programs through Fourth Grade

Child's name _____
 Grade applying for _____
 Birthdate _____
 Your Name _____
 Current Position _____
 For how long have you known this child? _____

Current School _____
 School Address _____
 City/State/Zip _____
 School Telephone _____
 Date Completed _____

This form may be duplicated if more than one teacher is completing this scale.

PERSONAL DEVELOPMENT	Area of Strength	Age Appropriate	Progressing Towards Age Appropriate	Area of Concern
Exhibits self esteem				
Exhibits confidence				
Exhibits self control				
Accepts responsibility for behavior				
Stands up for rights				
Solves problems constructively				
Accepts limits				
Is considerate				
Cooperates				
Plays cooperatively with peers				
Finds ways of entering group play				
Respects rights and property of others				
Respects needs of others				
Supports peers				
Shares				
Takes turns				
Is able to make choices				
Willing to try new activities				
Makes transitions				
Responds positively to constructive criticism				
Initiates play activities				
Is imaginative				
Is able to lead				
Is able to follow				
Is comfortable with adults				
Is responsive to adults				
is respectful of adults				

Please comment on personal development; narratives are particularly helpful: _____

ACADEMIC DEVELOPMENT	Area of Strength	Age Appropriate	Progressing Towards Age Appropriate	Area of Concern
Is attentive				
Concentrates				
Is curious				
Works independently				
Works cooperatively				
Listens in a group				
Willing to try the unknown				
Adjusts to routines and rules				
Exhibits problem solving ability				
Remembers events and information				
Follows directions				
Responds to teacher initiated activities				
Responds to child initiated activities				
Completes tasks				
Focuses on one task				
Moves easily from one task/activity to another				
Is a self starter				
Expresses thoughts clearly				
Enjoys school environment				
Demonstrates language development				

Please comment on academic development; particularly any areas of concern. Narratives are particularly helpful: _____

PHYSICAL DEVELOPMENT	Area of Strength	Age Appropriate	Progressing Towards Age Appropriate	Area of Concern
Small motor control and coordination				
Large motor control and coordination				
Speech development (articulation)				

Please identify any special needs, including auditory and visual development: _____

Child's attendance: ____regular ____frequent absences ____frequent tardiness

Are the parents aware of any concerns you have noted in this form? _____

Please comment on the parents' support of the child's learning and their cooperation with the school: _____

We welcome any other information which you believe would be helpful. Please include comments concerning any special needs of this child and/or family. _____

It is the policy of all members of the Independent Schools of St. Louis that all information received regarding a candidate's referral for admission will be treated with complete confidentiality. Only authorized school personnel have access to this information and then only to the extent that the information is relevant to admission and placement decisions. Information received within the scope of this policy is not disclosed to the applicant or to the applicant's family.

Your Signature _____ Thank you so very much for taking the time to complete this form.