



**HOPEWELL ACADEMY**  
Math Teacher Evaluation

**TO BE COMPLETED BY CURRENT MATH TEACHER**

**STUDENT INFORMATION**

Name (*first, middle, last*):

School Name:

Current Grade:

Seeking Grade :

**PARENTS/GUARDIANS**

To the Parent/Guardian: Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential teacher evaluation and the school report for the student listed above. If a teacher submits this page without parental signature, Hopewell Academy will assume your expressed consent.

Parent Signature:

Date:

**MATH TEACHER**

**To the math teacher:** The student named above is a candidate for admission to Hopewell Academy. Your evaluation is vital to our process. We would appreciate your honest responses to the questions below. When complete, please follow the directions at the end of the document to ensure confidentiality. Thank you for your assistance in evaluating this candidate.

What is the title of the course/s you teach this student? Include the level if appropriate.

How well do you know this student academically?

What are the student's strengths and weaknesses in your class?

Did the student complete homework, classroom and other assignments in a timely manner?

Was the work completed the quality you expect?

Please describe the ideal classroom environment for this student.

What class do recommend this student to take next year?

**HOPEWELL ACADEMY**  
**Math Teacher Evaluation**

Please place check marks at the points that represent your evaluation of the student in comparison to other students in her/his age group.

	Excellent (Top 10%)	Good (Above Average)	Average	Below Average	No basis for judgment
Knowledge of the basic skills					
Problem solving ability					
Reasoning ability					
Understanding of and appreciation for the underlying ideas and concepts					
Effort					
Overall performance					
Willingness to accept the challenge of the more difficult problems and exercises					
Command of mathematics when compared to the other students whom you have taught					
Academic potential					
Academic achievement					
Intellectual curiosity					
Effort/determination					
Ability to work independently					
Organization					
Creativity					
Willingness to take risks					
Concern for others					
Honesty/Integrity					
Self-esteem					
Maturity (relative to age)					
Responsibility					
Respect accorded by peers					
Emotional stability					
Overall evaluation as a student					

<b>Signature</b>	
<b>Printed Name</b>	
<b>Email Address</b>	
<b>Date</b>	

**Thank you for completing this evaluation. You may scan and email this form to [admissions@hopewellacademy.org](mailto:admissions@hopewellacademy.org), mail it in a sealed envelope to the address Below or fax it to (919) 481-4127 (Cover Page Recommended). Confidentiality is guaranteed.**