

3331 Connaught Ave., Halifax, NS, B3L 3B4 tel: 902.423.9777 fax: 902.423.9555 admin@halifaxindependentschool.ns.ca www.HalifaxIndependentSchool.ca

Confidential School Report

Student's name:	Present Grade: In what capacity?				
How long have you known the applicant?					
Please check the box w	hich best describe	s this student in c	omparison to oth	er students his/h	er age.
Social/Behaviour	Excellent	Good	Fair	Poor	No basis for judgement
Consideration of others					
Peer relationships					
Classroom behaviour					
Playground behaviour					
Emotional maturity					
Self-discipline/Self-control					
Adjustment to transitions					
Receptivity to feedback					
Energy and initiative					
Sense of responsibility					
Ability to work with others					

Comments:

Ability to work independently

Academic	Excellent	Good	Fair	Poor	No basis for judgement
Self-motivation					
Perseverance					
Attitude towards learning					
Intellectual curiosity					
Gross motor skills and coordination					
Fine motor skills					
Organization of time and materials					
Work habits					
Written expression					
Oral expression					

Comments:

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How would you say this chi	ld learns best?				
Does this student have any	academic, social or hea	Ilth concerns/spe	cial needs c	f which you are aw	are? If yes, please explain.
To your knowledge, has thi	s child ever demonstrat	ed/engaged in be	haviour tha	at was inappropriat	e for their age? If so, explain.
ls this student an enthusias	tic participant in school	programmes?	☐ Yes	□ No	
s this student frequently a	s this student frequently absent from, or late to, school?			□ No	
How would you describe th	is child's peer group?				
f you have a sense of this o		the broader com	nmunity or e	extracurricular activ	rities, please elaborate.
Caring and supporti		t supportive	Indifferent		No basis for judgement
					l l l l l l l l l l l l l l l l l l l
Parental attitude towa		fferent	Suppo	tive and helpful	Overly-engaged
Comments:					
Parental support of sc	hool:				
Very supportive	Supportive	Indifferent	Negative		No basis for judgement
Comments:			<u> </u>		
Please provide any addition	nal information you thin	k might be releva	int:		
Date:	te: Name (print):				
Signature:		Positi	on:		
Please return the complete	d form directly to Halifa	ax Independent S	chool.		

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