

# COASTAL CHRISTIAN HIGH SCHOOL

709 George Anderson Drive • Wilmington, NC 28412  
(910) 395-9995 • admissions@coastalchristian.net

## CONFIDENTIAL STUDENT EVALUATION - GRADES 9 - 12

**To the Teacher:**

The student named below is a candidate for admission to Coastal Christian High School. It would be appreciated if you would please complete this form and return it within one week to: CCHS Admissions Office, 709 George Anderson Drive, Wilmington, NC 28412.

Name of applicant \_\_\_\_\_ Candidate for grade \_\_\_\_\_

Please check as appropriate	Excellent	Above Average	Average	Below Average	No Basis for Judgement
Participates in classroom discussions					
Asks pertinent questions					
Thinks through a process before acting					
Is attentive when other speak					
Completes assignments on time					
Prepares neat and well-organized work					
Is interested in going beyond the lesson					
Works at a level consistent with ability					
Has a positive attitude					
Is self motivated and purposeful					
Cooperates					
Exhibits leadership skills					
Gets along with peers					
Respects authority					
Exhibits emotional stability					
Demonstrates organization					
Presents original ideas well					
Is reliable and trustworthy					
Is dependable					

Has the curriculum been adjusted or modified to suit the needs of the student? \_\_\_\_Yes \_\_\_\_No

Additional Comments: Please provide any information you feel will help guide this student's evaluation.

*Thank you for your time and cooperation.*

Name of teacher \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

Name of School \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

I/We hereby authorize release of requested information to complete the admission process at CCHS.

I/We understand this becomes part of my child's student application file.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_