



# PRESCHOOL

OF DUNWOODY UNITED METHODIST CHURCH

1548 Mount Vernon Road ♦ Dunwoody, Georgia 30338 ♦ 770-394-2555 - Telephone ♦ 770-394-6003 - Fax  
www.dumcp.org ♦ [preschool@dunwoodyumc.org](mailto:preschool@dunwoodyumc.org)

## KINDERGARTEN – TEACHER EVALUATION FORM

**Parents:** Please deliver this form to your child's teacher. Teachers can mail this form directly to Dunwoody United Methodist Church Preschool (please provide them with a stamped addressed envelope) or scan and email to [preschool@dunwoodyumc.org](mailto:preschool@dunwoodyumc.org)

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR

Child's Current School \_\_\_\_\_

Address of Current School \_\_\_\_\_  
\_\_\_\_\_

Phone Number of Current School \_\_\_\_\_

Parent Name \_\_\_\_\_

Signature of Parent of Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR

**Director or Teacher:** Thank you for taking the time to complete this evaluation. Your observations are important in giving us a complete and fair picture of this child. All information will be held in confidence. When you have completed the evaluation please use the stamped, addressed envelope to mail it to Dunwoody United Methodist Church Preschool or scan and email it to [preschool@dunwoodyumc.org](mailto:preschool@dunwoodyumc.org).



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Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR

Evaluator's Name and Title \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ Phone Number \_\_\_\_\_

***Please grade these areas using the following criteria:***

*Above Average – 1, Average – 2, Below Average – 3, Area of Concern – 4*

### Student Behaviors:

\_\_\_\_\_ Attending behaviors in a large group      \_\_\_\_\_ Interaction with peers  
\_\_\_\_\_ Ability to adapt to change in routine      \_\_\_\_\_ Social problem solving

### Language:

\_\_\_\_\_ Receptive: Follows directions and explanations  
\_\_\_\_\_ Expressive: Speaks in age appropriate manner (syntax, grammar, vocab)

### Reading Readiness:

\_\_\_\_\_ Phonemic awareness: Ability to hear and manipulate the sounds of language  
\_\_\_\_\_ Phonics: Awareness of letter-sound correlations

### Math Concepts:

\_\_\_\_\_ Awareness of quantitative concepts (counting, 1-1 correspondence, use of manipulatives to show knowledge of numbers and quantity)  
\_\_\_\_\_ Sorts, classifies and patterns

### Work Habits:

\_\_\_\_\_ Works independently      \_\_\_\_\_ Works in a group      \_\_\_\_\_ Focuses  
\_\_\_\_\_ Drifts      \_\_\_\_\_ Completes tasks

In relation to other students, how much of your attention does this student require in regards to classroom conduct?:

\_\_\_ Significantly more    \_\_\_ More    \_\_\_ Average    \_\_\_ Less    \_\_\_ Significantly Less

In relation to other students, how much of your attention does this student require to succeed academically?:

\_\_\_ Significantly more    \_\_\_ More    \_\_\_ Average    \_\_\_ Less    \_\_\_ Significantly Less

Areas in which the child excels: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Areas in which the child has the greatest needs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List three words that best describe this child: \_\_\_\_\_