



WINDHAM
Learning Tree
Academy

TEACHER EVALUATION FORM

_____ has applied to The Windham

Child's Name

Learning Tree Academy, LLC . We would like you to tell us about this child.
Please feel free to add any additional comments.

1. What are this child's strengths and areas of special interest?

2. What are the child's weak areas or specific learning and language challenges?

3. How does this child relate to peers?

4. How does this child relate to adults?

5. How do his/her academic skills compare to peers?

6. How do his/her social skills and maturity compare to peers?

7. Has this child had any medical or behavioral concerns which affect learning at school?

8. Please briefly describe the type of educational program you have provided (e.g., regular or special education, academic level, structure, size of class, etc.)

Teacher's Name: _____

School: _____

Date: _____

Email address: _____

May we contact you for further information? yes no

Thank you for taking the time to complete this form. Please return as soon as possible to:

Admissions Coordinator
Windham Learning Tree Academy, LLC
4 Cobbetts Pond Rd. Suite 12
Windham, NH 03087