REFERRAL FORM FOR GRADES 1 - 8
2027-28

3886 Chestnut Avenue, Concord CA 94519
925-689-3990

This form is required for applicants for grades 1 through 8. The first section is to be completed by the applicant's parent. Please give to the child's current teacher or principal for completion and submission to St. Agnes.

TO BE COMPLETED BY PARENT

Student's name _____ Current grade _____

Please release the requested information for my child and return to St. Agnes School by mail by March 1, 2028 Thank you!

Parent's name _____ Date _____

Parent's signature _____

TO BE COMPLETED BY STUDENT'S CURRENT TEACHER/PRINCIPAL

School currently attending _____

School address _____

School phone _____

Length of time in this school _____ Attendance record _____

1. Please rate the following areas using this code: E = Excellent, G = Good, F = Fair, U = Unsatisfactory

   General attitude: _____ Cooperation: _____

   Effort: _____ Classroom conduct: _____

   Relationship with teacher: _____ Relationship with peers: _____

   School study habits: _____ Home study habits: _____

2. Please rate the following areas using this code: 1 = Outstanding progress, 2 = Satisfactory progress, 3 = Below average progress, 4 = Failing to make the necessary progress

   Reading: _____ Math: _____ Social Studies: _____

   Language Arts: _____ Science:

3. Final grade from last issued report card/ most recently taken test:

   Report card date of issue: _____

   Reading score: _____ Language Arts score: _____

   Standardized test name _____ Date _____

   Math score: _____

4. Please describe any disabilities (physical, emotional, mental, language barriers, family situations, etc.) which affect the applicant's progress:

_____

_____

_____

5. Student's current reading level: ____

   Books read: _____

   _____

6. Student's current math level (please explain): _____
7. Discipline (please explain): _____

   _____

   _____

Name of person completing report: _____

Title: _____

Signature: _____ Date _____

School name: _____

School address: _____

School phone: _____

Inclusive dates child attended your school: _____

Thank you for your time and assistance in completing this form.