

**ST. ANNE SCHOOL**  
1320 14<sup>th</sup> Avenue San Francisco, CA 94122  
Office: (415) 664-7977 Fax: (415) 661-6904  
Website: www.stanne.com

**LETTER OF ACADEMIC INFORMATION (Grades 1-8)**

Dear Teacher,

Your help in completing the following student assessment is appreciated. Please return the completed form to the parent.

Sincerely,

Thomas C. White  
Principal

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Name of Student \_\_\_\_\_ Current Grade \_\_\_\_\_

**Please check the appropriate response:**

Always   Usually   Frequently   Never

- |   |                       |                       |                       |                       |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. The student is working at grade level in:              |                       |                       |                       |                       |
| Mathematics   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Reading   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| English   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. The student completes work on time:                    |                       |                       |                       |                       |
| Classwork   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Homework  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. The student works neatly and takes pride in work.      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4. The student is cooperative in/out of the classroom.    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. The student assumes responsibility.                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. The student works well with other students.            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. The student actively participates in class.            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. The student is able to work independently.             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. Parents are supportive and involved with this student. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please feel free to add any additional information that would be helpful.

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Teacher Signature