

## Applicant's Current School - Principal Evaluation

For Parent(s)/Guardian(s): M of access and that of my child to complete this evaluation and ma	this head of school	ol/principal evalu	ation. I ask that the	head of school or prin		
Parent/Guardian Signature						
Parent/Guardian Signature						
Applicant's Name			Candidate for Grade			
Last		First				
Confidential to current Principal	pal or Head of Sc	hool:				
Instructions: Thank you for taking Please mail this form directly to	the Office of Adm	ission.		vill be considered stric	tly confidential.	
Please rate this student in relatio	n to other students	s in his/her age g	roup. (Circle one)			
Motivation Conduct Respect accorded by faculty Respect accorded by peers Overall	Superior Superior Superior Superior	Good Good Good Good Good	Average Average Average Average Average	Below Average Below Average Below Average Below Average	Poor Poor Poor Poor	
Has the applicant had any discip	linary problems? If	f so, please explai	n.			
Has this student been known to	use drugs or alcoh	ol? If so, please e	xplain.			
To your knowledge, has this stud	dent had any violat	ions of the law? I	f so, please explain.			
Is this student allowed to return	to your school? If	not, please explai	n.			
Signature			Date	Date		
Title	Phone no.					

**Reminder:** Please mail this form directly to the Office of Admission. Thank you for your assistance.

Director of Admission The Winston School 5707 Royal Lane

Dallas, TX 75229 Fax: 214-691-1509