



# Principal Evaluation Form

Name of Student: \_\_\_\_\_

Current Grade: \_\_\_\_\_ Number of years at your institution: \_\_\_\_\_

Please describe your impression of this student's classroom participation and learning skills:

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Has this student ever had any discipline issues? If yes, please describe what they were and explain if in your opinion they continue to be a problem:

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What is your impression of this student's yiras shamayim?

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What is your impression of this student's social skills and ability to interact with his peers?

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Please let us know if there's anything else you feel we should know in making a determination about this application:

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Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ School: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Thank you kindly for your time and assistance!**

**Please email the completed form to [Klurman@LECFL.com](mailto:Klurman@LECFL.com)**

If you have any questions or concerns, please contact us by email or call (305) 673-5664 ext. 2