

CHEP Teacher Questionnaire

Date: _____

CHEP Teacher: _____ CHEP Student: _____

The student above has applied to PCHS for the coming school year. Please aid the application process by completing the following questionnaire regarding this student. **Comments would be appreciated.** Our goal is to place the student in the most successful environment. **The information on this form is confidential between CHEP and PCHS.**

Please **FAX this completed form and the following documents ASAP to PCHS, Attn: Cindy Scarborough, 714-508-0215**

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Student STAR Testing results (most current)

☐

Student has graded report card. Faxing copy with this questionnaire

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Student has non-graded report card. (Not necessary to fax)

Academics

English/Reading Comprehension: ___ below grade level ___ at grade level ___ above grade level

Comments: _____

English/Writing Skills: ___ below grade level ___ at grade level ___ above grade level

Comments: _____

Math: Last course completed: _____ ___ below grade level ___ at grade level ___ above grade level

Comments: _____

Please circle the appropriate responses below: 1 = very low, 5 = very high

Study Habits

Assignments completed on time	1	2	3	4	5
Self directed	1	2	3	4	5
Quality of work	1	2	3	4	5

Comments: _____

Parent Involvement/Support 1 2 3 4 5

Comments: _____

CHEP Transition Courses

<input type="checkbox"/> Physical Science	Grade earned (or current grade) _____
<input type="checkbox"/> Computer Skills	Grade earned (or current grade) _____
<input type="checkbox"/> World History (7 th Grade)	Grade earned (or current grade) _____
<input type="checkbox"/> US History (8 th Grade)	Grade earned (or current grade) _____
<input type="checkbox"/> Short Stories	Grade earned (or current grade) _____

Additional Comments:

CHEP Teacher Signature: _____ **Site** _____ **Date** _____