

# CONFIDENTIAL SCHOOL REPORT / TRANSCRIPT REQUEST

DUE DATE

Student is applying for grade

9 10 11 12

***This form is confidential and will be used solely for admissions and placement;  
it includes common admissions questions developed by Catholic high schools in the Archdiocese of Seattle.  
Only the transcript will become part of the student's permanent record.***

**APPLICANT:** Please complete this page and give the entire form to your school principal. He/she will return it, along with a copy of your official transcript/permanent record, standardized test scores, report cards from the preceding two years, grades/progress reports from the current year, and any notices of disciplinary action (NDA) directly to the schools you check below.

## TO BE COMPLETED BY APPLICANT

Student Name:

last

first

middle

preferred

Address:

street

city

state

ZIP

Home Phone:

Sex: F M

Birthdate:

Current School:

Parents/Guardians:

Name

Phone (home)

Phone (work /cell)

E-mail

Name

Phone (home)

Phone (work /cell)

E-mail

I hereby give permission for my daughter's/son's transcript to be forwarded to the Catholic high schools indicated below.

Type name of Parent/Guardian completing form

Date

Please check appropriate boxes:

..... **Archbishop Thomas J. Murphy High School**

*Director of Admissions*

12911 39th Ave. SE, Everett, WA 98208-6159

(425) 332-3036 / (425) 385-2875 FAX

[www.am-hs.org](http://www.am-hs.org) [admissions@am-hs.org](mailto:admissions@am-hs.org)

..... **Holy Names Academy**

*Vice Principal of Academics*

728 21st Ave. E, Seattle, WA 98112-4058

(206) 323-4272 / (206) 323-5254 FAX

[www.holynames-sea.org](http://www.holynames-sea.org) [admissions@holynames-sea.org](mailto:admissions@holynames-sea.org)

**Bishop Blanchet High School**

*Director of Admissions*

8200 Wallingford Ave. N, Seattle, WA 98103-4599

(206) 527-7741 / (206) 527-7712 FAX

[www.bishopblanchet.org](http://www.bishopblanchet.org) [mpierce@bishopblanchet.org](mailto:mpierce@bishopblanchet.org)

**John F. Kennedy Catholic High School**

*Director of Admissions*

140 S 140th St., Burien, WA 98168-3496

(206) 246-0500 / (206) 242-0831 FAX

[www.kennedyhs.org](http://www.kennedyhs.org) [admissions@kennedyhs.org](mailto:admissions@kennedyhs.org)

**Eastside Catholic School**

*Director of Admissions*

232 228th Ave. SE, Sammamish, WA 98074-7207

(425) 295-3014 / (425) 392-5160 FAX

[www.eastsidecatholic.org](http://www.eastsidecatholic.org) [abennett@eastsidecatholic.org](mailto:abennett@eastsidecatholic.org)

**O'Dea High School**

*Director of Admissions*

802 Terry Ave., Seattle, WA 98104-1294

(206) 622-1308 / (206) 340-4110 FAX

[www.odea.org](http://www.odea.org) [kpatterson@odea.org](mailto:kpatterson@odea.org)

**Forest Ridge School of the Sacred Heart**

*Director of Admissions*

4800 139th Ave. SE, Bellevue, WA 98006-3099

(425) 641-0700 / (425) 643-3881 FAX

[www.forestridge.org](http://www.forestridge.org) [admissions@forestridge.org](mailto:admissions@forestridge.org)

**Seattle Preparatory School**

*Director of Admissions*

2400 11th Ave. E, Seattle, WA 98102-4098

(206) 577-2146 / (206) 577-2198 FAX

[www.seaprep.org](http://www.seaprep.org) [schooldocs@seaprep.org](mailto:schooldocs@seaprep.org)

### TO BE COMPLETED BY THE OFFICE OF THE PRINCIPAL

Please complete this confidential form as accurately as possible and sign at the bottom of this page. If the student is applying to more than one high school, please photocopy this **completed form** and send it, along with a copy of the **student's official transcript/permanent record, standardized test scores, report cards from the preceding two years, grades/progress reports from the current year, and any NDA** (notice of disciplinary action) to the high schools indicated by the applicant on the other side of this page.

Name of person completing form \_\_\_\_\_

Position \_\_\_\_\_ E-mail \_\_\_\_\_

School \_\_\_\_\_ Phone \_\_\_\_\_ Ext. \_\_\_\_\_

How many years has the applicant attended your school? \_\_\_\_\_

This year, how many times has the applicant been absent? \_\_\_\_\_ Tardy? \_\_\_\_\_

In the last three years, has the applicant ever been suspended? Yes No Expelled? Yes No

If yes, please include NDA (notice of disciplinary action).

The applicant has completed or will complete Washington State History: 7th Grade 8th Grade

Does the applicant's family meet contractual obligations in a timely fashion? Always Mostly Rarely

Are the parents/guardians actively involved in the school community? Always Mostly Rarely

Do the parents/guardians demonstrate respect for all members of the school community? Always Mostly Rarely

#### COMMENTS

OPTIONAL: I would like a telephone conference to provide further information: Yes

Best time to call \_\_\_\_\_ Phone to call \_\_\_\_\_ Ext. \_\_\_\_\_

#### CHECKLIST

Along with this form, please forward the following items to **each** Catholic high school indicated by the applicant on the previous page.

- Official transcript/permanent record
- Standardized test scores
- Report cards from the preceding two years
- Grades/progress reports from the current year
- NDA (notice of disciplinary action)

PRINCIPAL'S SIGNATURE

DATE

# CONFIDENTIAL TEACHER EVALUATION FORM

DUE DATE

Student is applying for grade

9 10 11 12

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*Please complete this page and give the entire form to the student's current teacher in a core academic subject. He/she will return it directly to the schools you check below.*

## TO BE COMPLETED BY APPLICANT

Student Name

last

first

middle

preferred

Address

city

state

ZIP

Home Phone:

Sex: F M

Birthdate:

Current School:

Parents/Guardians:

Name

Phone (home)

Phone (work /cell)

E-mail

Name

Phone (home)

Phone (work /cell)

E-mail

I hereby give permission for my daughter's/son's transcript to be forwarded to the Catholic high schools indicated below.

Type name of Parent/Guardian completing form

Date

Please check appropriate boxes:

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**School Director of Admissions**

12911 39th Ave. SE, Everett, WA 98208-6159

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**Vice Principal of Academics**

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8200 Wallingford Ave. N, Seattle, WA 98103-4599

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[www.seaprep.org](http://www.seaprep.org)

[schooldocs@seaprep.org](mailto:schooldocs@seaprep.org)

**TO BE COMPLETED BY THE TEACHER**

Please complete the remaining pages of this confidential form as accurately as possible and sign at the bottom of Page 3. If you would like a telephone conference to provide additional information, indicate at the bottom of Page 3. If the student is applying to more than one high school, please photocopy this completed evaluation form and send a copy, by the due date, to the high schools indicated by the applicant on the previous page.

Name of person completing form

E-mail

Position

Subject taught

School

Telephone

Ext.

How long have you known the applicant?

In what capacity?

What are the first few words that come to mind to describe the applicant?

THE STUDENT:	All of the time	Most of the time	Some of the time	Rarely	Comments
Displays intellectual creativity					
Demonstrates higher-level thinking skills					
Works to potential					
Participates actively in class					
Works well independently					
Works well with others					
Completes work on time					
Manages time effectively					
Is punctual					
Responds appropriately to criticism					
Takes responsibility for actions					
Cooperates with teachers					
Respects the learning environment					
Relates well to others					
Treats others with respect and dignity					
Demonstrates integrity					
Demonstrates leadership qualities					
Participates in school activities					

*Please leave this box blank until you have saved or copied the appropriate number of completed forms for the student, remembering to fill in the placement information on Page 3. Then, if you would like to add any specific information pertaining to a particular school, please do so in the space provided below.*

**SPECIFIC INFORMATION FOR**

name of high school

I recommend this student for the high school designated above

enthusiastically	with confidence	with reservations	not at all
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Additional comments:

Best time to call \_\_\_\_\_ Phone number to call \_\_\_\_\_ Ext. \_\_\_\_\_

DATE \_\_\_\_\_

**PLACEMENT INFORMATION**

*This information must be completed before the form is returned. Please circulate to appropriate faculty.*

**ENGLISH**

Given the applicant's academic ability, writing skills, self-motivation, and work ethic, this student would be most successful in:

an advanced program

a standard program

a program that is below grade level

other

Comments

Name of current English teacher

E-mail

Current English grade

**MATHEMATICS**

Name of mathematics course completed by the end of this school year

Current mathematics text and publisher

What next course would you recommend for this student?

At what level?

an advanced program

a standard program

a program that is below grade level

other

Comments

Name of current mathematics teacher

E-mail

Current mathematics grade

**INTERNATIONAL LANGUAGE**

Does the student speak a language other than English at home? Yes Which language?

Has the applicant studied an international language? Yes Which language?

Which grade levels? (check all that apply) 6 7 8 9 10 How many hours per week does current class meet?

Current language text and publisher

What next course would you recommend for this student?

Comments

Name of current language teacher

E-mail

Current international language grade