



# ST. THOMAS MORE COLLEGIATE

HOME OF THE KNIGHTS SINCE 1960

## STUDENT INFORMATION SHEET – (FORM B)

CONFIDENTIAL – TO BE COMPLETED BY THE APPLICANT'S TEACHER					
Student's Name:			Teacher's Name:		
Current Grade:			School:		
<p>The objective of the following checklist is to give an overview of the student's performance.</p> <p>Exceeds Expectations – Exceeds grade-level expectations in significant ways</p> <p>Fully Meets Expectations – Consistently meets grade-level expectations</p> <p>Generally Meets Expectations – Usually meets grade-level expectations</p> <p>Minimally Meets Expectations – Inconsistencies in meeting grade-level expectations</p> <p>Not Yet Within Expectations – Does not meet grade-level expectations</p>					
	Exceeds	Fully Meets	Generally Meets	Minimally Meets	Not Yet Within
General Organizational/Self-Discipline Skills:					
Ability to Work Independently					
Work Habits					
Reading Comprehension					
Writing Skills					
Mathematics Skills					
Artistic Ability					
Athletic Ability					
Religious Studies					
Homework Completion					
Interaction with Peers					
Extra-Curricular:					
<input type="checkbox"/> Swimming <input type="checkbox"/> Basketball <input type="checkbox"/> Football <input type="checkbox"/> Cross-Country <input type="checkbox"/> Hockey <input type="checkbox"/> Lacrosse <input type="checkbox"/> Soccer <input type="checkbox"/> Debate Team <input checked="" type="checkbox"/> Student Council                      Track & Field <input type="checkbox"/> Volleyball <input type="checkbox"/> Wrestling <input type="checkbox"/> Chess Club <input type="checkbox"/> Green Team <input type="checkbox"/> Game/Programming					
Service and Volunteering:					
<input type="checkbox"/> Crossing Guard                      Peer Helper                      Play Day <input type="checkbox"/> Office Duty <input type="checkbox"/> Altar Server <input type="checkbox"/> Other _____					
Does the student have an Individual Education Plan (IEP)? <input type="radio"/> No <input type="radio"/> Yes					
Special Placements/Recommendations:					
Other important information:					
Signature:			Date:		

Please mail, email or fax directly to:  
 Ms. Maria Cirillo, Registrar  
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