



**Student Name** \_\_\_\_\_

**School** \_\_\_\_\_

Please give your realistic appraisal of the student's math abilities:

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I recommend this Student for Seton Catholic Prep (Circle the Best Match):

enthusiastically      with confidence      with reservations      not at all

I would like a telephone conference to provide further information:    Yes    No

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PLACEMENT INFORMATION

Name of the Mathematics Course completed by the end of this 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

Any additional comments: \_\_\_\_\_

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**Please return Evaluation form to:  
Seton Catholic College Preparatory  
Admissions Office  
9000 NE 64<sup>th</sup> Avenue  
Vancouver, WA 98665  
Phone: (360) 258-1932 ~ Fax: (360) 258-1936  
Email: [kkutch@setonhigh.org](mailto:kkutch@setonhigh.org)**