

## Sample Annual Evaluation Form

Child's Name: \_\_\_\_\_

Birth date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Evaluation Date: \_\_\_\_\_

Upon review of the portfolio and discussion with the pupil named below, I have found that the pupil has demonstrated progress at a level commensurate with his/her ability.

\_\_\_\_\_  
Signature of Fla. Certified Teacher

\_\_\_\_\_  
Certificate Number