

**Creative Writing Department – Denver School of the Arts (DSA) - Required Evaluation Form**

(Must be filled out by applicant’s current language arts/writing teacher.)

Name of Applicant: \_\_\_\_\_

*Please answer the 10 questions about your student’s ability to be a successful participant in the Creative Writing Program at DSA. Simply circle the response that best captures the student. Lastly, seal in an envelope, sign the seal and hand back to the student.*

1. The student has a clear and genuine passion for reading and writing.

Always              Most of the Time              Occasionally              Rarely

2. The student enjoys sharing ideas and collaborating on projects.

Always              Most of the Time              Occasionally              Rarely

3. The student loves using their imagination and being creative.

Always              Most of the Time              Occasionally              Rarely

4. The student is respectful of their classmates and teachers.

Always              Most of the Time              Occasionally              Rarely

5. The student works well with others, knowing when to speak, listen or lead.

Always              Most of the Time              Occasionally              Rarely

6. The student is well-behaved in a variety of settings.

Always              Most of the Time              Occasionally              Rarely

7. The student has the ability to work independently and successfully complete deadlines.

Always              Most of the Time              Occasionally              Rarely

8. The student is self-disciplined and focused.

Always              Most of the Time              Occasionally              Rarely

9. The student is intellectually curious.

Always              Most of the Time              Occasionally              Rarely

10. The student would thrive in a creative, yet rigorous environment where all students are committed to the development of a particular art form.

Strongly Agree              Agree              Somewhat Agree              Disagree

\_\_\_\_\_  
Please sign to confirm all responses are honest and reflect the opinion of the student’s current language arts teacher:

\_\_\_\_\_  
Printed Name of Language Arts/Writing Teacher

\_\_\_\_\_  
Signature

*If you would like to provide additional comments, please use the back of this page. You are also welcome to contact one of the department directors: [kobzadicon@gmail.com](mailto:kobzadicon@gmail.com) & [mrmosskaplan@gmail.com](mailto:mrmosskaplan@gmail.com).*