



DAMIEN MEMORIAL SCHOOL

The Congregation of Christian Brothers
of Hawaii, Inc.
1401 Houghtailing Street
Honolulu, Hawaii 96817-2797
Telephone (808) 841-0195
Facsimile (808) 847-1401

ACADEMIC RECORDS RELEASE FORM

To the Parent(s)/Guardian(s) of the applicant:

*Please complete this form and take to the Main Office of your child's **current school**.*

Your current school will mail the appropriate documents to Damien Memorial School

School currently attending: _____

Authorization to send a copy of report cards and significant achievement test data is
authorized for:

Student's Name

Date of Birth

To the Current School: Please mail/fax/e-mail copies of report cards, **INCLUDING** the first semester of the current school year (**please hold until first semester grades are available**) and the previous school year, and the student's most recent significant achievement test data to:

**Admissions Office
Damien Memorial School
1401 Houghtailing Street
Honolulu, HI 96817
Fax: (808) 847-1401
E-mail: limos@damien.edu**

Signature of Parent or Guardian

Date

OTHER STUDENT INFORMATION

Name(s) of family members who attended or are currently attending Damien:

Name	Relationship	Date of Graduation
_____	_____	_____
Name	Relationship	Date of Graduation

List the activities you would like to participate in at Damien _____
(E.g. sports, band, speech/debate, yearbook, student newspaper, student government, etc.)

How did you first learn about Damien? (Select ALL that apply) TV Radio Newspaper/Magazine
 Family/Friend Admissions Presentation/Fair/Open House Other: _____

Please indicate any special needs or circumstances that may assist us in knowing more about the applicant:

Additional information:

Student's Main Ancestry _____ Hawaiian Ancestry? Yes No

Religion _____ If Catholic, what Parish? _____

Has the student officially received the following Roman Catholic Sacraments?

Baptism? Yes No First Communion? Yes No Confirmation? Yes No

DAMIEN ENTRANCE EXAM (Applicants for grades 6 – 9 only)

Please select an Entrance Exam date. All exams will be held from 8:00 – 11:30 am.

**Due to the ongoing pandemic, the Damien Entrance Exam is discontinued until further notice. We will instead look at students' standardized test scores from their current schools (Terra Nova, SBA, Stanford Achievement Test, ACT, SSAT, etc.).*

FINANCIAL AID

There are limited funds available for financial aid. Funds are given on a "need" basis rather than "first-come" basis and should NOT be relied upon to meet tuition obligations. The financial aid application must be filled out via Smart Aid and all required documentation must be uploaded by February 15, 2022 to be considered.

Would you like the financial aid application instructions to be emailed to you in December? Yes No

Damien Memorial School is a Catholic school in the tradition of the Congregation of Christian Brothers. Damien does not discriminate against any applicant for admission or financial aid on the basis of race, color, gender, religion, national or ethnic origin. Damien's students are afforded equal access to school programs and activities without regard to race, color, gender, religion, national or ethnic origin.

I hereby authorize Damien Memorial School to contact schools and others to obtain information in connection with this application, including test scores, scholastic and conduct reports, school records and references. I authorize schools and others to provide Damien with information requested by it in connection with this application. I agree that Damien and the providers will have no liability to me, the applicant or others for anything contained in the information and that neither Damien nor the providers will have any obligation to provide the information or a summary of it to me, the applicant or others.

A \$50.00 non-refundable application fee must accompany this application form.

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Mail application to:

Admissions Office
Damien Memorial School
1401 Houghtailing Street
Honolulu, HI 96817



Hawai'i Association of Independent Schools (HAIS)

Confidential Teacher Reference Report | *1st through 12th Grades*

- English/Language Arts Teacher
 Math Teacher
 Self-contained Classroom Teacher
 Other core academic Teacher _____

Parent/Legal Guardian: Please fill out this section and deliver this form to your child's teacher. Include an addressed and stamped envelope to the school(s) to which you would like this evaluation sent. The evaluator will mail these forms directly to that/those school(s).

Applicant's Name _____ Preferred Name: _____
Last First M.I.

Gender: M F Birthdate: ____/____/____ Applying for Grade: ____ Applicant's Current School: _____

To Parent/Legal Guardian: By submitting this evaluation form and your application for consideration by the member of the Hawai'i Association of Independent Schools (HAIS), you hereby release the HAIS school, its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from information provided. All information provided on the attached evaluation form will be held in strictest confidence and will not be shared with students, parents, or guardians. This evaluation will remain confidential and does not become part of the student's permanent academic record.

Parent/Legal Guardian's Signature _____ Date ____/____/____

To The Teacher: Your candid appraisal of this child will be of invaluable assistance in giving us a complete and fair evaluation of this applicant. We appreciate your cooperation; your evaluation will be held in strict confidence.

ACADEMIC SKILLS	Excellent	Good	Fair	Poor	No Basis for Judgment
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of basic skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application of skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abstract Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination/Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Areas in which the applicant has the greatest strengths: _____

Areas in which the applicant has the greatest needs: _____

WORK SKILLS				
Ability to work in a group	<input type="checkbox"/> Consistently works well	<input type="checkbox"/> Occasionally has trouble	<input type="checkbox"/> Usually has difficulty	<input type="checkbox"/> Has great difficulty
Ability to work independently	<input type="checkbox"/> Consistently works well	<input type="checkbox"/> Needs help occasionally	<input type="checkbox"/> Needs help frequently	<input type="checkbox"/> Needs constant help
Attention span	<input type="checkbox"/> Actively engaged	<input type="checkbox"/> Attentive	<input type="checkbox"/> Variable attention	<input type="checkbox"/> Requires frequent redirection
Class participation	<input type="checkbox"/> Joins readily	<input type="checkbox"/> Contributes occasionally	<input type="checkbox"/> Wants to dominate	<input type="checkbox"/> Rarely contributes
Completes assignments on time	<input type="checkbox"/> Consistently	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs additional time	<input type="checkbox"/> Has difficulty
Quality of work	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Follows directions	<input type="checkbox"/> Easily and accurately	<input type="checkbox"/> Usually	<input type="checkbox"/> Needs much explanation	<input type="checkbox"/> Rarely
Takes initiative	<input type="checkbox"/> Consistently	<input type="checkbox"/> Usually	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Rarely

SOCIAL SKILLS AND PERSONAL QUALITIES				
Attitude toward school	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Citizenship	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Concern for others	<input type="checkbox"/> Very considerate	<input type="checkbox"/> Usually considerate	<input type="checkbox"/> Occasionally considerate	<input type="checkbox"/> Rarely considerate
Emotional maturity	<input type="checkbox"/> Very mature	<input type="checkbox"/> Age appropriate	<input type="checkbox"/> Sometimes immature	<input type="checkbox"/> Very immature
Integrity	<input type="checkbox"/> Highly trustworthy	<input type="checkbox"/> Usually trustworthy	<input type="checkbox"/> Occasionally trustworthy	<input type="checkbox"/> Questionable
Leadership potential	<input type="checkbox"/> Leader	<input type="checkbox"/> Can follow or lead	<input type="checkbox"/> Leads on occasion	<input type="checkbox"/> Rarely leads
Relationships with peers	<input type="checkbox"/> Role model	<input type="checkbox"/> Healthy relationships	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Relates poorly
Reaction to criticism/setbacks	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Relationships with adults	<input type="checkbox"/> Courteous	<input type="checkbox"/> Usually positive	<input type="checkbox"/> Occasional problems	<input type="checkbox"/> Shows little respect
Responsibility	<input type="checkbox"/> Very responsible	<input type="checkbox"/> Usually responsible	<input type="checkbox"/> Sometimes responsible	<input type="checkbox"/> Rarely responsible
Self-confidence	<input type="checkbox"/> Healthy self-image	<input type="checkbox"/> Needs some support	<input type="checkbox"/> Seems over-confident	<input type="checkbox"/> Poor self-image
Self-control	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Sense of humor	<input type="checkbox"/> Highly developed	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poorly developed
Spirit of cooperation	<input type="checkbox"/> Consistently cooperates	<input type="checkbox"/> Usually cooperates	<input type="checkbox"/> Occasionally cooperates	<input type="checkbox"/> Rarely cooperates
Warmth of personality	<input type="checkbox"/> Consistently friendly	<input type="checkbox"/> Usually friendly	<input type="checkbox"/> Occasionally friendly	<input type="checkbox"/> Rarely friendly

Evaluator: Your completion of the following section to the extent you are able is greatly appreciated!

Please share any additional comments about the applicant's personal characteristics and qualities: _____

Describe the ways the applicant contributes to your school community (character, citizenship, leadership, athletic or artistic): _____

Thank you for your time and evaluation of this applicant. May we contact you if we have questions?

(_____) _____ - _____
 Phone Email

How long and in what capacity have you known the applicant? _____

 Teacher's name (please print or type) | Subject taught

 Signature Date / /