Teacher Recommendation for: ______________________________ Running for: ______________________________

Please rank each student in the following categories from 1-5. Please carefully consider each category before assigning scores. This information will be kept confidential.

1-Weak 2-Below Average 3-Average 4-Above Average 5-Outstanding

1. Dependability: This student is on time with all assignments and participates in classroom activities. He/she also follows direction and classroom procedure without fail.

2. Attendance: The student maintains good attendance (no cuts) and arrives to class on time daily.

3. Leadership: The student is assertive, but not in an aggressive way, takes initiative, thinks through problems, and has the ability to motivate others.

4. Courtesy: The student is courteous and considerate of others, has the ability to get along with others, willingly volunteers to help others, demonstrates respect for teachers as well as other authority figures.

5. Cooperation: The student is willing to work, to comply with rules and regulations, and to accept criticism with a positive attitude; he/she is also able to fit into a team atmosphere.

6. Attitude: The student has a positive outlook about education, attends to assignments in a positive way, and demonstrates a strong sense of school pride.

7. Maturity: The student is able to see more than one point of view in an issue. Responsibility is also a primary quality of the student. The student is able to look at himself/herself realistically.

8. Organization: The student organizes time well. The student fulfills requirements for work missed due to school related activities and makes up work due to absences.

9. Trustworthiness: Could you trust the student to carry out an important task? Could you trust the student not to betray a confidence? Could this student be trusted with money?

10. Communication: The student communicates opinions and feelings honestly without displaying disrespect for authority or peers.

Please describe any good/bad experiences you had with this student.
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Do you feel this person would be a good representative of CHS and the position they are seeking? If not, please explain your opinion.
________________________________________________________________________________________
________________________________________________________________________________________

Name ____________________________________________ Signature ____________________________________________

Class ____________________________________________

*please return this completed recommendation form to Ms. Karen Schromsky’s mailbox in the Main Office by 3/22/18*