**Teacher Recommendation Form for The Scholars Program**

Student (Please Print):

Teacher (Please Print):

School year in which you taught this student:

The young ladies who have been invited to apply to **The Scholars Program** have been identified based upon many criteria including, but not limited to, their academic performance and grade level classification. Please take a moment to rank them on a 1-5 scale according to your experience as their instructor. (Scale: 5 = Outstanding, 1 = Poor)

Interpersonal Skills: 5 4 3 2 1

Dependability: 5 4 3 2 1

Respectfulness: 5 4 3 2 1

Integrity: 5 4 3 2 1

Conduct: 5 4 3 2 1

Additional Comments:

Teacher’s Signature: Date:

Teachers, please return this completed form to the mailbox of:

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Thank you for your attention! We appreciate your input.