

District/Authority Scholarship
Teacher/Supervisor Statement of Recommendation

Thank you for completing the Statement of Recommendation regarding the student name below. The information on this evaluation will be used to determine scholarship winners from a field of excellent applicants. It would greatly assist the District Award Scholarship Committees if you supplied a frank assessment of the candidate.

Teacher: _____ (Please print)

Student: _____

1. Courses

What course(s) have you taught the applicant?

2. Student Attributes

Rate the applicant on **each** of the following five Attributes. (please check the appropriate column for each attribute)

	Excellent	Very Good	Good	Fair
Learner				
Thinker				
Innovator				
Collaborator				
Contributor				

3. Student Ranking

How do you rank this student as an applicant for a District Scholarship? (choose only one)

Excellent

Very Good

Good

What evidence have you seen from this student that demonstrates commitment and passion to their career goal?

