ROCKVILLE HIGH SCHOOL

Evaluation for Student Recommendation

(PLEASE PRINT)

Student: _____ Date: _____

Teacher: _____ Subject: _____

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THIS INFORMATION IS FOR COUNSELOR USE ONLY

	Average	Above Average	Excellent (Top 10%)	Outstanding (Top 5%)	No Basis For Judgment
A. Motivation					
B. Creative Qualities					
C. Self-Discipline					
D. Growth Potential					
E. Leadership					
F. Self-Confidence					
G. Warmth of Personality					
H. Sense of Humor					
I. Concern for Others					
J. Personal Initiative					
K. Reactions to Setbacks					

Please write a brief description of the candidate's capabilities, personality, level of insight in subject matters, and/or any special talents. Include comments pertinent to a recommendation for college or employment. Thank you for your help

Comments:

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Teacher's Signature: _____ Date: _____

PLEASE RETURN THIS FORM TO THE REGISTRAR