Rev: 3/10

## **Teacher Feedback: Confidential**

Student's Name	Subject and Class Date Given to Teacher					
Геаcher's Name						
Guidance Counselors Name	:					
<b>Γο the Student:</b> (1) This form	n should be complet	ed by a teacher who	knows you well, (	forms should go to	o teachers of different majo	
subjects), and (2) Complete the	he heading on top af	ter you have asked t	this teacher.			
To the Teacher: Please return whom you know, PLEASE C	n completed form <b>t</b> o HECK THE APPRO	room 134 as soon PRIATE SPACE I	as possible. In rela FOR EACH ITEM I	tion to others in the BELOW.	ne applicant's present grade	
	Extraordinary (Top 2-3%)	Outstanding (Top 5%)	Excellent (Next 10%)	Good	Average	
Academic Achievement		•				
Academic Potential						
Academic Motivation						
Effective Class Discussion						
Written Expression						
Creative Qualities						
Leadership						
Enthusiasm						
Curiosity						
Respect Given by Peers						
Respect Given by Faculty						
Self-Confidence						
Reaction to Setbacks						
Warmth of Personality						
Concern for Others						
Dependability						
Emotional Maturity						
nitiative						
Sense of Humor						
Please DESCRIBE the applic	ont in VOLID CLID I	CT ADEA ONI V	using specific aver	nnlag or anadotae	Dlaga ha gamprahangiya	
and try to <u>distinguish</u> this stud FOR EVALUATING THIS S	dent from others you					
Feacher's Signature:				Date:		