**Teacher Recommendation Form**

To the Applicant:

Please give this evaluation form to a teacher who knows you well. Please understand that all teacher evaluations are **strictly confidential**. This means no teacher, counselor, or administrator shall be permitted to share with you or your parents any of the content of those evaluations. The intent of the above guideline is to ensure the selection committee is provided with a true, honest, and accurate evaluation for each candidate.

To the Teacher:

The GHS Chapter of the National Honor Society (NHS) is currently evaluating students for the traditional Induction Ceremony. Please help the NHS selection committee by filling out this evaluation form and returning it to applicant in a sealed envelope, or placing it in my mailbox (Ms. Bell) in a sealed envelope. Please make sure the name of the student is written on the envelope. I would appreciate an honest and accurate evaluation of the candidate, so your comments will not be disclosed to the applicant. Thank you very much for your time and consideration. Contact Ms. Bell with any questions.

Evaluations are due no later than **Friday,** **September 14th, 2017**

Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity do you know this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student to the best of your knowledge in the following areas on a 2 (highest) to a 1 (lowest) scale. (NA)= no basis for evaluation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leadership** | 2 | 1 | 0 | N/A |
| Initiative, resourcefulness |  |  |  |  |
| Reliability, dependability |  |  |  |  |
| Exemplary attitude |  |  |  |  |
| Performance in school offices |  |  |  |  |
| Positive influence on peers |  |  |  |  |
| Ability to work with others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Citizenship (Class Participation)** | 2 | 1 | 0 | N/A |
| Attendance, punctuality |  |  |  |  |
| Preparedness |  |  |  |  |
| Participation |  |  |  |  |
| Timely submission of assignments |  |  |  |  |
| Behavior, compliance to rules |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Character** | 2 | 1 | 0 | N/A |
| Integrity, honesty |  |  |  |  |
| Courtesy, respect |  |  |  |  |
| Responsibility |  |  |  |  |

Please include any free response which might prove helpful to our evaluation (on the reverse).

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Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity do you know this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student to the best of your knowledge in the following areas on a 2 (highest) to a 1 (lowest) scale. (NA)= no basis for evaluation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leadership** | 2 | 1 | 0 | N/A |
| Initiative, resourcefulness |  |  |  |  |
| Reliability, dependability |  |  |  |  |
| Exemplary attitude |  |  |  |  |
| Performance in school offices |  |  |  |  |
| Positive influence on peers |  |  |  |  |
| Ability to work with others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Citizenship (Class Participation)** | 2 | 1 | 0 | N/A |
| Attendance, punctuality |  |  |  |  |
| Preparedness |  |  |  |  |
| Participation |  |  |  |  |
| Timely submission of assignments |  |  |  |  |
| Behavior, compliance to rules |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Character** | 2 | 1 | 0 | N/A |
| Integrity, honesty |  |  |  |  |
| Courtesy, respect |  |  |  |  |
| Responsibility |  |  |  |  |

Please include any free response which might prove helpful to our evaluation (on the reverse).

**Teacher Recommendation Form**

To the Applicant:

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Evaluations are due no later than **Friday,** **September 14th, 2017**

Name of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity do you know this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student to the best of your knowledge in the following areas on a 2 (highest) to a 1 (lowest) scale. (NA)= no basis for evaluation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leadership** | 2 | 1 | 0 | N/A |
| Initiative, resourcefulness |  |  |  |  |
| Reliability, dependability |  |  |  |  |
| Exemplary attitude |  |  |  |  |
| Performance in school offices |  |  |  |  |
| Positive influence on peers |  |  |  |  |
| Ability to work with others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Citizenship (Class Participation)** | 2 | 1 | 0 | N/A |
| Attendance, punctuality |  |  |  |  |
| Preparedness |  |  |  |  |
| Participation |  |  |  |  |
| Timely submission of assignments |  |  |  |  |
| Behavior, compliance to rules |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Character** | 2 | 1 | 0 | N/A |
| Integrity, honesty |  |  |  |  |
| Courtesy, respect |  |  |  |  |
| Responsibility |  |  |  |  |

Please include any free response which might prove helpful to our evaluation (on the reverse).

**Outside (Adult) Recommendation Form**

To the Applicant:

Please give this evaluation form to an adult who knows you well. Please understand that all recommendation evaluations are **strictly confidential**. This means no teacher, counselor, or administrator shall be permitted to share with you or your parents any of the contents of those evaluations. The intent of the above guideline is to ensure the selection committee is provided with a true, honest, and accurate evaluation for each candidate.

To the Recommender:

The GHS Chapter of the National Honor Society (NHS) is currently evaluating students for the traditional Induction Ceremony. Please help the NHS selection committee by filling out this evaluation form and returning it to applicant in a sealed envelope. Please make sure that the name of the applicant is written on the envelope. I would appreciate an honest and accurate evaluation of the candidate, so your comments will not be disclosed to the applicant. Thank you very much for your time and consideration. Contact Ms. Bell with any questions by e-mail at [rachel.bell@k12.wv.us](mailto:rachel.bell@k12.wv.us) .

Evaluations are due no later than **Friday,** **September 14th, 2017**

Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity do you know this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student to the best of your knowledge in the following areas on a 2 (highest) to a 1 (lowest) scale. (NA)= no basis for evaluation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leadership** | 2 | 1 | 0 | N/A |
| Initiative, resourcefulness |  |  |  |  |
| Reliability, dependability |  |  |  |  |
| Exemplary attitude |  |  |  |  |
| Performance in school offices |  |  |  |  |
| Positive influence on peers |  |  |  |  |
| Ability to work with others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Citizenship (Class Participation)** | 2 | 1 | 0 | N/A |
| Attendance, punctuality |  |  |  |  |
| Preparedness |  |  |  |  |
| Participation |  |  |  |  |
| Timely submission of assignments |  |  |  |  |
| Behavior, compliance to rules |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Character** | 2 | 1 | 0 | N/A |
| Integrity, honesty |  |  |  |  |
| Courtesy, respect |  |  |  |  |
| Responsibility |  |  |  |  |

Please include any free response which might prove helpful to our evaluation (on the reverse).

**Outside (Adult) Recommendation Form**

To the Applicant:

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Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role of Evaluator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In what capacity do you know this student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student to the best of your knowledge in the following areas on a 2 (highest) to a 1 (lowest) scale. (NA)= no basis for evaluation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leadership** | 2 | 1 | 0 | N/A |
| Initiative, resourcefulness |  |  |  |  |
| Reliability, dependability |  |  |  |  |
| Exemplary attitude |  |  |  |  |
| Performance in school offices |  |  |  |  |
| Positive influence on peers |  |  |  |  |
| Ability to work with others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Citizenship (Class Participation)** | 2 | 1 | 0 | N/A |
| Attendance, punctuality |  |  |  |  |
| Preparedness |  |  |  |  |
| Participation |  |  |  |  |
| Timely submission of assignments |  |  |  |  |
| Behavior, compliance to rules |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Character** | 2 | 1 | 0 | N/A |
| Integrity, honesty |  |  |  |  |
| Courtesy, respect |  |  |  |  |
| Responsibility |  |  |  |  |

Please include any free response which might prove helpful to our evaluation (on the reverse).