

TENNIS INSTRUCTOR ENDORSEMENT

Name of applicant _____

The above student is applying for a GTCTA Indoor Tennis Scholarship. The primary reason for this award is to help participants of summer tennis programs continue their play through the winter months at an indoor facility. Your candid evaluation of the applicant will be of assistance in the selection process. Please complete both sides of this endorsement or attach a letter on behalf of the applicant. This form should be signed, sealed with your signature over the envelope seal, and mailed or returned to the applicant. The applicant must return this form to the GTCTA office no later than August 1, 2003.

An individual of the applicant's choice should complete this section.

Name of person completing this form _____

Position/title _____

Institution _____

Address _____

How long have you known the applicant? _____

In what connection have you known the applicant? _____

The following factors are estimates of the candidate's potential for success. Please rate the candidate's ability in each area of which you have personal knowledge. (A number 1 rating represents the most favorable; a number 7 represents the least favorable)

	1	2	3	4	5	6	7	
Positive attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Negative Attitude
Listens well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does not listen
Exceptional tennis skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No tennis talent
Strives for excellence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Will settle for less than the best
Highly motivated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Needs to be pushed
Passion for tennis is evident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No love of the game

Please rate your recommendation of the candidate for a GTCTA Indoor Tennis Scholarship by checking one of the following:

_____ I strongly recommend

_____ I recommend

_____ I do not recommend

Please discuss any strengths and weaknesses you think may affect the candidate's commitment to achieving his/her potential in a winter tennis program.

Date _____ Signed _____

Thank you for your cooperation and effort in completing this evaluation form. Please return this form directly to the applicant in a sealed envelope with your signature over the seal. The applicant must return this form to the GTCTA office no later than August 1, 2003.