

Student Evaluation Form: Guidance Counselor

Please type or print clearly. This form should be printed, completed, scanned and submitted to Zaria O'Bryant, Accelerate Program Administrator via email at obryant@gssm.k12.sc.us no later than **February 1st** of the student's freshman year of high school.

Student's Name: _____
Last First Middle

School: _____ District: _____ County: _____

School Address: _____

Is the student a legal resident of SC? (Check one) Documentation is on file. Current documentation is not on file.

Along with this evaluation form, please submit a verification of 1st semester grades, 2nd semester courses, GPA, Class Rank, and Standardized Test Scores.

HS credits completed (Check all that apply): Algebra I Geometry Science with a lab

Other HS credits completed (Please list): _____

How do you think this student would contribute to and benefit from participating in the ACCELERATE Engineering Education program?

Has this student been suspended, expelled or placed on academic probation in the past 12 months? If yes, explain:

Describe this student's school and/or class attendance? Excellent Good Poor





ACCELERATE
South Carolina's Engineering LaunchPad
A PRODUCT OF THE SC GOVERNOR'S SCHOOL FOR SCIENCE & MATHEMATICS

Share any other relevant information regarding this student's likelihood of success in the ACCELERATE program. Your candid response is appreciated and will remain confidential.

Printed Name Counselor Completing Evaluation: _____

Email Address: _____ Telephone Number: _____

Signature of Counselor Completing Evaluation: _____ Date _____

All evaluations completed by teachers and guidance counselors are held to the strictest confidence and will shared with the selections committee and only those GSSM staff who have a need to know.



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