



**Teacher Recommendation
Ridgewood High School
AVID Program 2014-2015**

Recommendation for: _____
(student's full name)

Student Number: _____ Date: _____

Student's School: CHASCO MIDDLE SCHOOL

Teacher Name: _____

Teacher Email: _____

Teacher Signature: _____

Please rate the student on a scale of 1 – 5. (5 = excellent, 4 = very good, 3 = average, 2 = some difficulty, 1 = not a strength)

General Behavior	_____	School Attendance	_____
Organizational Skills	_____	Internal Motivation	_____
Turning Work in on Time	_____	Writing Skills	_____
Willing to Accept Support	_____	Ability to Work With Other Students	_____
Ability to do Honor Work With Extra Support	_____		

How will this student benefit from the AVID program and what can he or she can offer to AVID as an active participant?

*****Please return completed form to Ms. Deb Davies by March 14, 2014***
Do not return completed form to student**

**Questions? Email Kristen Martanovic, AVID Site Coordinator
Ridgewood High School ~ kmartano@pasco.k12.fl.us**