

**Montgomery County Public Schools Educational Foundation
EVALUATION FORM (TEACHER OR COUNSELOR)
for Scholarship Applicants**

This form must be returned with the application packet by April 1, 2009.

Student's Name

Teacher or Counselor's Name

High School Name

How long have you known the student and in what capacity? _____

Please rate the applicant for attending Montgomery College.

Poor	Fair	Good	Excellent	Trait Description	Comments
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic Motivation	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-discipline	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-confidence and independence	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal Initiative	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emotional Maturity	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reliability; Dependability	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Respect for teachers and other students	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Character and Personal Promise	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic Promise	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perceptive	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication skills	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attendance	

Please give an example and/or anecdote of how the student exemplifies one or more of the above qualities.

In your opinion, why should this student be considered for an Educational Foundation Scholarship to Montgomery College?

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- ☐ I highly recommend this student
 - ☐ I recommend this student
 - ☐ I cannot recommend the student for the reasons stated above

Print Name

Signature, Teacher or School Counselor

Date