

Dowell Robotics Club

Teacher Recommendation Form 2012 – 2013

Student's Name (First, Last): _____ Grade: 6 7 8

Teacher's Name: _____ Email Address: _____

Teacher's School: Dowell M. S. Bennett E. S. Eddins E. S. Finch E. S. Glen Oaks E. S.

Teacher's Instructional Grade: ____ Teacher's Instructional Subject: Math Science

Please evaluate the student listed above by completing the following information:

Ranking Scale:

5 = Exceptionally High

4 = Above Average

3 = Average

2 = Below Average

Ability and Personality Traits	5	4	3	2
Personal Integrity				
Social and Emotional				
Ability to work with peers				
Ability to work with teachers				
Leadership Qualities				
Communication Skills				
Writing Skills				
Creativity				
Innovation				
Dependability				
Ability to work independently				

Indicate strength of your overall endorsement by checking the appropriate box:

- Highly Recommended
- Recommended
- Recommended with Reservation
- Not Recommended

Please write additional comments that will aid in assessing the student's qualifications: _____

Please describe any exceptional talents or skills in which the student has exhibited: _____

Please return the completed form to DMS Front Office by 10/5/2012. Thank you.