

MEDICAL SCIENCES II CNA - Teacher/Counselor Recommendation Form

Student Name: _____ High School: _____

.....

To the teacher completing this recommendation:

The above student has pre-registered for the Medical Sciences II CNA Program at the Bollman Technical Education Center. This is a highly rigorous program/course designed for students who are interested in pursuing careers in medicine or health care related fields.

Please rate the student in the following areas and provide examples. We greatly appreciate your thoughtful appraisal of this applicant.

On a scale of 1 = Below Average
 2 = Average
 3 = Above Average
 4 = Excellent
 5 = Outstanding/Superior

A. Teamwork/ability to work as a team member _____

Example: _____

B. Attendance _____

Example: _____

C. Ability to work effectively without direct supervision _____

Example: _____

D. Dependability/ability to complete tasks on time _____

Example: _____

E. Communication skills/Written skills _____

Example: _____

F. Ability to accept constructive criticism _____

Example: _____

G. Critical thinking and problem solving skills _____

Example: _____

H. Respect for authority _____

Example: _____

Additional comments: (Optional)

Teacher/Counselor Signature

Title

Phone #

Date

**Please place this form in an interoffice envelope and send it via District 12 Pony to
Linda Alexander at BTEC by April 12, 2016**