Cheerleader Tryout Teacher Evaluation Form

Student Name:	Grade: 8 th / 9 th / 10 th / 11 th
Teacher:	Subject:
Please complete this form and return it to my box (Lightfoot) on the High School Campus by the end of school on Thursday, April 14, 2011 . Forms for the 8 th graders should be turned in to the Front Office by the end of school on Thursday, April 14 . Please DO NOT GIVE THE FORMS BACK TO THE STUDENT . A portion of the cheerleader candidate's tryout score is dependent on your evaluations, so please complete the form and return them to me as soon as possible with honest responses and ratings . Please rate the student according to how YOU feel the student performs in YOUR class or classes. These evaluations will not be shared with students or parents. They will be kept confidential and reviewed by me and/or an administrator.	
Thank you for your help and support, Barbara Lightfoot, Krum High School	
On a scale of 1 to 10, please rate the student in each of the areas listed l	below:
(1 = Strongly Disagree, 5 = Disagree somewhat, 10 = Strongly	y Agree)
1) Student exhibits a positive attitude towards teacher and all fellow cl	assmates.
2) Student demonstrates responsibility in class and other areas.	
3) Student demonstrates leadership skills in class and in other areas.	·
4) Student demonstrates the ability to get along with others and resolve	e conflicts.
5) Student demonstrates dependability .	
6) Student is cooperative with teachers and other students.	
7) Student turns in all assignments on time . (10 = always; 5 = has to b 1 = late regularly or makes excuses)	e reminded;
9) Student is motivated to be a hard worker.	
10) Student is supportive of his/her school and other students.	
Total Score:	
Additional comments:	
Teacher Signature:	