TEACHER RECOMMENDATION FOR *INTERNSHIP for 2015-2016*

(PLEASE MAKE SURE STUDENT HAS FILLED IN TOP PORTION BEFORE GIVING TO YOU FOR COMPLETION)

TO STUDENT : Fill in the following items before giving the recommendation to your teacher for completion.

Student's Name _____

School_____ **Current Grade in School** _____

Internship area of interest request _____

During: (check one if you have a preference)
_____ Fall semester

_____ Spring semester

TO TEACHER: The student named is applying for an Internship in the area indicated above. Please complete this recommendation form as part of the application screening process. The information you provide will be kept **CONFIDENTIAL.** **PLEASE RETURN THIS FORM IN A SEALED ENVELOPE. PLEASE RETURN TO STEPHANIE MITCHENER.**

Students are instructed to give recommendations to teachers who have taught them in courses directly related to their internship request. **In what class did you teach or are you currently teaching this student**?

_____

Please use the following evaluation scale to assess this student in **each area** listed.

10 – highest **1 – lowest**

Outstanding		Above Average		Average		Below Average		Unsatisfactory	
10	9	8	7	6	5	4	3	2	1

_____Demonstrates ability to work with others
_____Uses good judgment
_____Shows initiative
_____Enjoys challenges
_____Accepts responsibility
_____Maintains positive attitude
_____Accepts constructive feedback
_____Produces quality work
_____Has high degree of self-discipline

_____ Demonstrates honesty and integrity
_____ Has effective written communication skills
_____ Has effective oral communication skills
_____ Has excellent attendance
_____ Shows enthusiasm for learning
_____ Displays maturity
_____ Can be a positive role model for others
_____ Is adaptable/flexible
_____ Utilizes good time management

If you were responsible for placing and/or supervising this student in an internship, would you have any concerns about this student's ability to have a successful experience? _____No _____Yes; explain.

_____

Keeping in mind the internship this student is requesting, do you: (check one)
_____Highly recommend _____Recommend _____Recommend with reservations_____Prefer not to recommend

Comments: _____
_____
_____
_____

Teacher _____ Date _____