

## Greer Middle College Charter High School Student Government

Applicant's Name \_\_\_\_\_

Teachers, **do not return this form to the student** because your responses are confidential. Please return this recommendation form to me by placing it in my teacher's box or bringing it to my classroom. Please turn in all recommendations by the deadline of **Wednesday, September 6<sup>th</sup>**.

*Using a scale of 1 (weakest) to 5 (best), please rate this Student Government applicant in the following areas. Please do your best to rate on all areas.*

	1	2	3	4	5
Professionalism when addressing adults					
Sensitivity to Others					
Leadership Skills					
Dependability/Commitment					
Integrity					
Ability to Accept Constructive Criticism					
Ability to Work in Groups					
Creativity					
Intelligence					
Academic Achievement					
Communication/Grammar/Writing Skills					
Motivation/Self-motivated					
Organizational Skills					
Resourcefulness					
Respectful to fellow classmates					
Maturity					
Willingness to volunteer					
Potential for growth					
Classroom etiquette					
Attendance / Promptness					

Comments:

Your Name \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

**Thanks! Please return this recommendation form to Mrs. Bailey by Wednesday September 6th!**