TEACHER EVALUATION

National Scholars Program

This form <u>must</u> be completed by a teacher in a <u>major</u> subject area: Math, English, History, Science, or Foreign Language. (Evaluations from other teachers will not be accepted)



Student Name: School Name:		School Dis				
		School Pho				
School Address:		City, State, Zip:				
The above student is applying to Pathways to College, an afterschool program requiring additional effort beyond the normal school day. He/she must have a recommendation from a teacher as part of the application process. Your candid evaluation is important to our consideration of the student. This form has been designed to take a minimal amount of you time. Please return the completed form to nspscholars@pathwaystocollege.org						
Attributes	One of top few ever taught (1)	Excellent (Top 10%)	Average (3)	Below Average (4)	No basis for judgment (5)	
Academic Potential	(1)	(2)	(5)	(4)		
Academic Achievement						
Class Preparation and Participation						
Creativity						
Ability to Work Independently						
Concern for Others						
Responsibility						
Overall Evaluation as a Student						
Overall Evaluation as a Person						
Are you currently teaching the applicant? Yes No If yes, in what subject(s)?						
Have you taught the applicant in the past? Yes No If yes, in what subject(s)?						
If you would like to make additional comm	nents, please do	so below:				
By signing this Pathways to College Teacher I signature – and emailing the completed for attest that this evaluation was completed in cor Teacher Name	m to <u>nspschola</u> nsideration of the	e student named a	college.org from the state of t		email address, I	
Feacher Signature Date						
Thank you for your time	e and for your si	ipport of this stu	dent's educatio	nal goals.		