Evaluation for Fraser High School Band Scholarship

**(to be completed by a teacher, school counselor, youth leader, or employer)**

# Name of student applying for scholarship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete this evaluation form based on your knowledge of the candidate. Your evaluation will be considered along with other factors including the student’s participation in the band program, participation in community service related to the band program, and financial need.

**The teacher/youth leader evaluations will be kept confidential.** This information will not be shared with the students or their family members. **Please return this sheet to Mr. James Rodgers, Band Director, Fraser High School by the end of May**.

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| --- | --- | --- | --- | --- | --- |
| CRITERIA | RATING | | | | |
|  | Weak Strong | | | | |
| Responsibility Student follows through on tasks/assignments |  |  |  |  |  |
| Cooperation Student works well with others |  |  |  |  |  |
| Attendance and Punctuality Student shows up on time for classes/events |  |  |  |  |  |
| Respect Treats peers and authority figures with respect |  |  |  |  |  |
| Behavior Student is a role model for others to follow |  |  |  |  |  |
| Attitude Has a positive attitude towards school/activities |  |  |  |  |  |

Comments/concerns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person completing this form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School or organization that you represent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Capacity in which you know this student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher/youth leader signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return form to:

Mr. James Rodgers, Band Director

Fraser High School

34270 Garfield Road

Fraser, MI 48026

Form must be received by the first Friday in May in order for student to be considered for scholarship.