

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.**

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 end of May in order for the student to be considered for the scholarship.