TEACHER RECOMMENDATION FORM

Student Name:	NDERSHIP	
Last	THE HAD LINGING THE	School:
FirstMI	METANOIA	Grade:GPA/Average Scores: Teacher
Gender	METANOIA	Principal Approval (Initials)

Please evaluate the student listed above by completing the following information:

Ranking Scale:

- 5 = Exceptionally High
- 4 = Above Average
- 3 = Average
- 2 = Below Average

Ability and Personality Traits	5	4	3	2
Personal Integrity				
Social and Emotional Wellness				
Ability to Work with Peers				
Ability to Work with Teachers				
Leadership Qualities (Diligence, Patience, Attentiveness, Initiative, Etc.)				
Oral Communication Skills				
Writing Skills				
Creativity				

Indicate strength of your overall endorsement by checking the appropriate box:

[__] Highly Recommended

[__] Recommended

[__] Recommended with Reservation

[__] Not Recommended

Please write additional comments that will aid in assessing the student's qualifications:

Signature of Teacher

Date

E-mail:

Once completed, please submit for final approval (signed initials of school principal; space provided above) and return to:

Metanoia Youth Leadership Academy, 2005 Reynolds Avenue, North Charleston, SC 29405 FAX :(843) 529-3639 Phone: (843) 529-3014