



Teacher Evaluation Form

Applicant's Name _____

Teacher's Name _____

Subject _____

Please rate the applicant from 1 to 5 in the following categories
*1 being the lowest, 5 being the highest

Motivation	1	2	3	4	5
Dedication	1	2	3	4	5
Work Ethic	1	2	3	4	5
Attitude	1	2	3	4	5
Leadership	1	2	3	4	5
Interaction with & respect toward peers	1	2	3	4	5
Interaction with & respect toward authority figures	1	2	3	4	5
Ability to balance extra-curricular activities and academics	1	2	3	4	5
Overall behavior rating	1	2	3	4	5
Do you recommend the Applicant?	1	2	3	4	5

Additional comments _____

Teacher's Signature _____ Date _____

*Please return to applicant in a sealed envelope

