

Student Aide Teacher Recommendation Form

Student Name

Teacher Name/Team

Please rate this student with regard to the following academic categories - 5 being very high; 1 being low (circle one). If you wish, for each category, give a brief explanation or example of why you gave this rating. Please return this form to one of the counselors. Your thoughtful and honest answers will be appreciated.

Flexibility 1 2 3 4 5

Does Well Academically 1 2 3 4 5

Works Well with Others 1 2 3 4 5

Follows Directions 1 2 3 4 5

Dependable 1 2 3 4 5

Attendance 1 2 3 4 5

Is this student a good candidate for Student Aide? Feel free to provide additional comments below.

1

(absolutely not!)

2

(yes, but with hesitation)

3

4

5

(absolutely!)
