



**TEACHER RECOMMENDATION page 2**

Student's Name \_\_\_\_\_

<b>Leadership</b>	<b>Below</b>			<b>Average</b>			<b>Above</b>		
1. Leadership among his or her peers	1	2	3	4	5	6	7	8	9
2. Being liked by peers	1	2	3	4	5	6	7	8	9
3. Persuasiveness in talking to others	1	2	3	4	5	6	7	8	9
4. Getting along with others	1	2	3	4	5	6	7	8	9
5. Ease in working with groups	1	2	3	4	5	6	7	8	9
6. Influencing the behavior of others	1	2	3	4	5	6	7	8	9
7. Working effectively with peers	1	2	3	4	5	6	7	8	9
8. Sociability; enjoying being around other people	1	2	3	4	5	6	7	8	9
9. Ease in participating in group activities	1	2	3	4	5	6	7	8	9
10. Actively participating in group decision making	1	2	3	4	5	6	7	8	9
<b>Total Score:</b>									

***Check the response that best describes your recommendation.***

\_\_\_\_\_ I feel confident recommending this student

\_\_\_\_\_ I recommend this student with reservations

***Check the response that best represents the student.***

**This student**

\_\_\_\_\_ is self-disciplined

\_\_\_\_\_ needs adult intervention to maintain appropriate behavior

\_\_\_\_\_ has behavior difficulties

**Teacher's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return the completed recommendation to the school counselor by **December 8, 2017**.

For admission Fall 2018