

Teacher Recommendation for Cheerleading Tryouts

Please complete this form and **return it to Ms. Robinson (111) or Mrs. Ball (107)** by Wednesday, April 12th. It is very important that you rate the student according to how YOU feel the student does in YOUR class. Please be realistic, as well as fair. Teacher evaluations will be averaged together to count for a portion of each candidate's score and they are not be shared with the student.

Thank you for your time and cooperation. If you have any questions, please feel free to contact Ms. Robinson or Mrs. Ball.

Name of Candidate: _____

Class(es) Taught: _____

Grade Received: _____

One a scale of 1 to 3 (1 being the lowest, 3 being the highest), please rate the applicant in each of the areas listed below:

_____ Ability to get along with others

_____ Attitude

_____ Cooperation

_____ Attendance & Punctuality

_____ Dependability

Additional Comments -

Teacher Signature: _____

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