

# Science Olympiad Teacher Recommendation

Attention: Please do NOT return this form to the student. All forms should be returned to \_\_\_\_\_.

## To Be Filled Out By Student

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher Name: \_\_\_\_\_ Subject: \_\_\_\_\_

## To Be Filled Out By Evaluating Teacher Only

Student's Current Grade: \_\_\_\_\_

On a scale of 0-5 (0 being "never" and 5 being "always"), evaluate the student above based on the following statements.

Consistently completes assignments. \_\_\_\_\_

Completes assignments with accuracy. \_\_\_\_\_

Is willing to help others when appropriate. \_\_\_\_\_

Has a positive attitude toward learning. \_\_\_\_\_

Has a positive attitude toward other students. \_\_\_\_\_

Has a positive attitude toward teachers/adults. \_\_\_\_\_

Follows instructions given by teacher \_\_\_\_\_

Asks questions when they do not understand a concept/instruction \_\_\_\_\_

Accepts their mistakes and/or attempts to correct them \_\_\_\_\_

Completes tasks within a timely manner \_\_\_\_\_

Attends class regularly \_\_\_\_\_

Would be an asset to an academic club \_\_\_\_\_

Briefly describe any other important qualities this student possess which would or would not make them a viable candidate for an academic competition team.

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Evaluating Teacher Signature: \_\_\_\_\_

Date: \_\_\_\_\_