

# TEACHER RECOMMENDATION FOR SENIOR INTERNSHIP Course

PLEASE MAKE SURE THE STUDENT HAS FILLED IN TOP PORTION BEFORE GIVING TO YOU

**TO STUDENT:** Fill in the following items before giving the recommendation to your teacher for completion. Give to teacher(s) that have taught you in the related internship area if possible. Example: medical internship=health science teacher, veterinarian office=animal science teacher, auto mechanic= auto tech teacher, chorus teacher= chorus teacher, etc.

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

School \_\_\_\_\_ Current Grade in School \_\_\_\_\_

Internship area of interest request \_\_\_\_\_ Date: \_\_\_\_\_

**TO TEACHER:** The student named is applying for an Internship in the area indicated above. Please complete this recommendation form as part of the application screening process. The information you provide will be kept **CONFIDENTIAL. PLEASE RETURN THIS FORM TO MY TEACHER BOX, IN THE WORKROOM.**

Donna Reavis

Please use the following evaluation scale to assess this student in **each area** listed.

10 – highest	1 – lowest	Outstanding	Above Average	Average	Below Average	Unsatisfactory					
		10	9	8	7	6	5	4	3	2	1
_____	_____	Demonstrates ability to work with others		_____		Demonstrates honesty and integrity					
_____	_____	Uses good judgment		_____		Shows initiative					
_____	_____	Accepts responsibility		_____		Shows enthusiasm for learning					
_____	_____	Maintains positive attitude		_____		Displays maturity					
_____	_____	Accepts constructive feedback		_____		Is adaptable/flexible					
_____	_____	Utilizes good time management		_____		Has excellent attendance					

If you were responsible for placing and/or supervising this student in an internship, would you have any concerns about this student's ability to have a successful experience? \_\_\_\_\_ No \_\_\_\_\_ Yes; explain.

\_\_\_\_\_  
\_\_\_\_\_

Keeping in mind the internship this student is requesting, do you: (check one)

\_\_\_\_\_ Highly recommend \_\_\_\_\_ Recommend \_\_\_\_\_ Recommend with reservations \_\_\_\_\_ Prefer not to recommend

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**In what class(es) did you teach or are you currently teaching this student?**

\_\_\_\_\_

Teacher Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name: \_\_\_\_\_

**Thank you for your time.**