

## Georgia Rotary Student Program --- Teacher Recommendation Form Student

### Evaluation Instructions:

- 1.) Students need **two** references for the GRSP – Teacher Recommendation Form.
- 2.) Complete the top portion of each evaluation form, then email your teacher or professor who teach you Art, English, Mathematics, Music, Science or Social Science.
- 3.) **Request that the teachers or professors complete the recommendation form and return it by email to [grsp@grsp.org](mailto:grsp@grsp.org) by November 25, 2022.** Please do not mail.

Student's Last Name:  First Name:  Middle Initial:   
Gender:  Home Country:

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### To the teacher or professor:

Recommendations are an important part of the evaluation process for granting a GRSP Scholarship. Please complete the form and return it by email to [grsp@grsp.org](mailto:grsp@grsp.org). Failure to complete and send this form in a timely manner may affect the consideration given your student. If you have questions or concerns please contact the GRSP Office at the following email address: [grsp@grsp.org](mailto:grsp@grsp.org)

Teacher or Professor's Name:

Name of school or university:

In which of the subjects listed above in item 2 have you taught this student?

Please add any remarks you deem appropriate regarding this student in the text box provided below:

Please complete Student Evaluation in next section.

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**Student Evaluation:** In evaluating the following categories, please compare this student other students you are currently teaching the same subject matter. We recognize that a precise absolute evaluation may not be possible and ask that you consider the term “top ten percent”, for example, a relative guideline.

No Basis For judgment	Below Average	Average	Above Average	Excellent	Top 10%
<input type="checkbox"/> Creative, original Thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Self Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Sense of Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Respect accorded By Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Respect accorded By Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**My recommendation for this applicant being awarded a Georgia Rotary Student Program Scholarship.**

	Not Recommended	Without enthusiasm	Moderately	Strongly	Enthusiastically
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To Promote the Guiding Principles of Rotary International	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<https://www.rotary.org/myrotary/en/learning-reference/about-rotary/guiding-principles>

Evaluator's Printed Name: \_\_\_\_\_

Evaluator's Signature: \_\_\_\_\_

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