Career Internship Program

Teacher Recommendation Form

Student Name _____ Internship Area _____

Teacher Name _____ Related course _____

Teachers: I rely heavily on your confidential feedback when approving interns. The above student has selected you to recommend him/her. Please complete the information below, and leave this form in Diane Wanamaker's box. Do not return this form to the student. THANK YOU. (1 is low, 5 is high)

Responsibility	1 2 3 4 5	Student knowledge about subject	1 2 3 4 5
Initiative	1 2 3 4 5	Good representative of THS	1 2 3 4 5

Additional Comments:

0	1	2	3	4	5
Do Not Recommend					Highly Recommend

Teacher Signature _____

Career Internship Program

Teacher Recommendation Form

Student Name _____ Internship Area _____

Teacher Name _____ Related Course _____

Teachers: I rely heavily on your confidential feedback when approving interns. The above student has selected you to recommend him/her. Please complete the information below, and leave this form in Diane Wanamaker's box. Do not return this form to the student. THANK YOU. (1 is low, 5 is high)

Responsibility	1 2 3 4 5	Student knowledge about subject	1 2 3 4 5
Initiative	1 2 3 4 5	Good representative of THS	1 2 3 4 5

Additional Comments:

0	1	2	3	4	5
Do Not Recommend					Highly Recommend

Teacher Signature _____