Evaluation for Fraser High School Band Scholarship (to be completed by a teacher, school counselor, youth leader, or employer)

Name of student applying for scholarship:				
Please complete this evaluation form based evaluation will be considered along with o participation in the band program, particip	ther factor	s including	the student's	
program, and financial need.				
The teacher/youth leader evaluations wi	ill be kept	confidenti	al. This infor	mation will
not be shared with the students or their far	nily memb	ers. Pleas	e return this s	sheet to Mr.
James Rodgers, Band Director, Fraser 1	High Scho	ol by the e	nd of May.	
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CRITERIA	RATING			
	Weak			Strong
Responsibility				
Student follows through on tasks/assignments				
Cooperation				
Student works well with others				
Attendance and Punctuality				
Student shows up on time for classes/events				
Respect				
Treats peers and authority figures with respect				
Behavior				
Student is a role model for others to follow				
Attitude				
Has a positive attitude towards school/activities				
Comments/concerns:				
Name of person completing this form: School or organization that you represent:				
Capacity in which you know this student:				
Teacher/youth leader signature:			Date:	
Please return form to: Mr. James Rodgers, Band Director Fraser High School 34270 Garfield Road Fraser, MI 48026 Form must be received by the first Friday in May i	n order for s	tudent to be c	onsidered for scl	nolarship.