



## Student of the Month Recommendation Form

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

Student's Teacher/Tutor: \_\_\_\_\_

Number of hours student is expected to be in class/month: \_\_\_\_\_

Number of actual hours student attended last month: \_\_\_\_\_

Please rate your student in the following categories, using 1 through five. Five is the highest score, and one is the lowest score.

1) Attitude \_\_\_\_\_

2) Motivation \_\_\_\_\_

3) Student's participation \_\_\_\_\_

4) Conscientious \_\_\_\_\_

5) Eagerness/willingness to learn \_\_\_\_\_

6) Other \_\_\_\_\_ (student newsletter, speaking engagements, passed GED, passed college entrance exam, etc.)

In the space below, please describe in words why you chose to nominate this student.

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