**Urban Teacher Academy** **Recommendation Form**

**Student name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Home high school:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To the recommending staff member:** The information you give on this form **will NOT be shared** with the student. Please be honest and specific. Put any additional comments on the reverse of this paper. **Return this form to Becky Miller, DMPS Central Campus, 1800 Grand Ave., DSM 50309 or fax it to 242-7598 as soon as is possible**.

***Please rank the above-named student in the following areas:***

 *Always Usually Rarely*

1. Has good attendance.
2. Is not tardy.
3. Engages in meaningful class participation.
4. Solves problems independently.
5. Freaks out easily under pressure.
6. Stays on task.
7. Completes tasks on time.
8. Is thorough and meticulous.
9. Interacts well with adults.
10. Argues over grades.
11. Writes well.
12. Revises work to improve product.
13. Takes criticism well.
14. Has a snippy "attitude."
15. Is trustworthy.
16. Admits mistakes.
17. Reads well.
18. Shares original ideas.
19. Does thorough research.
20. Is easily distracted.
21. Is a self-starter.
22. Shares tasks well within a group.
23. Views teachers as "helpers" rather than adversaries.
24. Is persistent when the going gets rough.
25. Asks "what more can be done?" when a task is complete.

**Would you recommend this student for a practicum or internship in a classroom? \_\_\_\_\_ yes \_\_\_\_\_ no**

**Teacher name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade/subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**