

SUNFIELD SPY's COMMUNITY FOUNDATION SCHOLARSHIP * TEACHER RECOMMENDATION FORM *
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Student Name: _____ Date: _____

Teacher's Name: _____

Directions To The Student: Please ask at least **two (2) teachers** to complete a recommendation form for you. It is in your best interest to approach at least two (2) teachers who know you well enough to effectively complete all aspects of the following student profile:

Directions To The Teachers: The SPY's are seeking your help in our annual effort to recognize outstanding seniors. Your thoughtful insight is a critical component in our overall selection process. Please return the completed student profile to the Guidance Secretary as soon as possible. Your comments will remain confidential. Please feel free to use the back of this form to elaborate on any item(s). Thank you for your time.

Please Rank The Following

	Poor	Fair	Average	Good	Outstanding
Academic Achievement					
Respectful Of Teaching Staff					
Respectful Of Others					
Reliability					
Positive Energy					
Respect Accorded By Other Students					
Character					
Initiative					
Honesty					
Well-Rounded Individual					
Helps Others					
Attitude					
Pushes Themselves To Achieve Their Full Potential					