

DREAM-CATCHERS PROGRAM

STUDENT RECOMMENDATION FORM

NOTE: PLEASE FILL IN EACH BLANK SPACE ON THIS FORM

To:

Concerning Student:

High School:

From:

Please return by:

The above student is interested in participating in the George Mason University/ FCPS/PWPS Dream-Catchers Program. As part of the application process the student must submit a recommendation form from his/her counselor; please complete and return by the date indicated above.

Evaluate the above student for the following characteristics; your responses are confidential. Use a rating scale where 5=high, 4=above average, 3=average (requires comment), 2= marginal, and 1 = low.

Dependability (due dates, assignments)

Cooperative (can work with others)

Flexibility (reacts to new and unanticipated situations)

Initiative (ability to work without constant supervision)

Maturity (seriousness in approach to studies)

Communication skills (oral and written)

Academic potential

Potential as a college student

Teacher/Counselor:

Subject:

Date of Recommendation:

COMMENTS: