Recommendation Form
(To be completed by Applicant’s Teacher)

Student/Camper’s Name ______________________________________

1. Rate the student on evidence you have seen of academic potential. Circle your rating on the scale below (1 = lowest; 10 = highest).

1 2 3 4 5 6 7 8 9 10

Please add comments to elaborate on your rating:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

2. Rate the student on evidence you have seen of computer interest. Circle your rating on the scale below (1 = lowest; 10 = highest).

1 2 3 4 5 6 7 8 9 10

Please add comments to elaborate on your rating:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

3. Rate the student’s ability to work in a group (1 = lowest; 10 = highest).

1 2 3 4 5 6 7 8 9 10

Please add comments to elaborate on your rating:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

4. Rate the student’s ability to work independently (1 = lowest; 10 = highest).

1 2 3 4 5 6 7 8 9 10

Please add comments to elaborate on your rating:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

5. Please comment on the student’s maturity.
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

6. Please make additional comments that would be useful to the selection committee.
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________________________________________________________________________________
________________________________________________________________________________

Teacher’s Information
Teacher’s signature __________________ Date signed: _________________

School _____________________________ Email Address _____________________________