



## Magnet Innovation Center Teacher Recommendation Form

Thank you for completing the teacher recommendation form for the below student. Please scan and email this completed form to Mrs. Kim Clark, Guidance Secretary, at [kim.clark@walton.k12.fl.us](mailto:kim.clark@walton.k12.fl.us) or complete the form online by accessing the following link/code (also found on our Website):

[https://forms.office.com/Pages/ResponsePage.aspx?id=OiUJugsuok2fpgZAO5LOGIE\\_QurqCDBLiyegZDdYtpxUNEIHQzJHNjBXQUhVTEhBRklEU1I4T1hETS4u](https://forms.office.com/Pages/ResponsePage.aspx?id=OiUJugsuok2fpgZAO5LOGIE_QurqCDBLiyegZDdYtpxUNEIHQzJHNjBXQUhVTEhBRklEU1I4T1hETS4u)



★ Do not send this form with the student.

Student Name: \_\_\_\_\_

In what course and grade did you teach the above student?

Course: \_\_\_\_\_ Grade: \_\_\_\_\_

Rate the student in the following categories:

<u>Category</u>	<u>Below Average</u>	<u>Average</u>	<u>Above Average</u>	<u>Outstanding</u>
1. Academic Ability	1	2	3	4
2. Leadership Skills	1	2	3	4
3. Class Participation	1	2	3	4
4. Responsibility	1	2	3	4
5. Creativity	1	2	3	4
6. Problem-Solving Ability	1	2	3	4
7. Ability to Collaborate with Peers	1	2	3	4
<b>Total</b>			_____ / 28	

Teacher Name:  
\_\_\_\_\_

Teacher Email:  
\_\_\_\_\_

Teacher School:  
\_\_\_\_\_

Teacher Phone Number:  
\_\_\_\_\_