Teacher/Counselor Recommendation

Your Name *

First Name Last Name

Email Address (school preferred) *

email@example.com

Title *

Please give your title or position

High School Name *

High School Address *

Country
Address

Address 2 (optional)

City

State Zip Code

Your Phone Number *

This can be your personal number, but a school contact number is preferred.

Applicant Name *

How long have you known the applicant? *

- o 1 year or less
- o 1 to 2 years
- o 2 to 3 years
- o 3 years or more

In what capacity have you known or interacted with the applicant? * Limit: 100 words

Evaluate applicant's determination to succeed, intellectual skills and abilities. You are asked to evaluate the applicant in seven (7) categories that will let us know how well the applicant meets the criteria for receiving a scholarship. The areas are "Motivation/Initiative", "Character/Integrity", "Effort/Work Habits", Task Management", "Oral Communication", "Written Communication" and "Working with Others".

Motivation/Initiative *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Teacher/Counselor Recommendation

Character/Integrity *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Effort/Work Habits *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Task Management *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Oral Communication *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Written Communication *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Teacher/Counselor Recommendation

Working with Others *

- o Exceptional (Top 1-2%)
- o Excellent (Top 5%)
- o Very Good (Top 10%)
- o Average (Top 50%)
- o Below Average (Lower 50%)
- Unable to judge

Personal Comments *

Limit 300 words

Personal comments are extremely important in the selection process. Please use the space below to write a forthright statement about the applicant that includes an assessment of both intellectual and personal qualities, as well as any particular strengths and weaknesses you fell we should be aware of.

Overall Recommendation of Applicant to receive the Paul S. Morton Scholarship *

- o Highly Recommend
- o Recommend
- o Recommend with Reservations
- o Do Not Recommend

Were you asked to provide the applicant's high school transcript *

- o No
- o Yes

If yes, Upload Applicant Transcript *

Please upload the applicant's transcript (must cover grades through first semester of senior year). PDF preferred

Certification *

✓ By checking this box, I certify that I am authorized to provide this recommendation as a representative of my school.