

RECOMMENDATION FORM

STUDENT: YOU ARE REQUIRED TO FURNISH TWO RECOMMENDATIONS FROM A TEACHER, COUNSELOR, EMPLOYER OR OTHER ADULT (NOT A PARENT OR OTHER RELATIVE OR GUARDIAN) WHO KNOWS YOU WELL AND CAN ATTEST TO YOUR ABILITY TO COMPLETE THE DRIVER EDUCATION PROGRAM.

Student name _____

1. How long have you known this student and in what context?

2. What are the first words that come to your mind to describe the applicant?

3. How do you rate this student in terms of:

No Basis		Below average	Average	Good (above average)	Very Good (well above average)	Excellent
	Motivation					
	Independence, initiative					
	Disciplined work habits					
	Conduct, citizenship and general behavior					
	Flexibility in new or challenging situations					

PLEASE COMPLETE OTHER SIDE

