

*** To the Applicant: Please submit this form to your school counselor or a teacher as part of the application process.**

Teacher/Counselor Recommendation

The purpose of Upward Bound is to prepare low-income and/or potential first generation college students (parents, or guardians, do NOT have a 4-year Bachelor's degree) for secondary and post-secondary education.

Please complete the form below and return it to the DCCC Upward Bound Coordinator's site office. Your comments will be kept confidential.

Student: _____ Student ID #: _____

Grade: _____ School: _____

My Assessment of the Student's Overall Performance is: (Check One)

Above Grade Level At Grade Level Below Grade Level

How Would You Rate this Student in Terms of:

	Poor	Fair	Average	Good	Excellent	Unknown
Attendance	1	2	3	4	5	N/A
Class Participation, Attitude & Motivation	1	2	3	4	5	N/A
Maturity	1	2	3	4	5	N/A
Responsibility	1	2	3	4	5	N/A
Desire to Learn	1	2	3	4	5	N/A
Emotional Stability	1	2	3	4	5	N/A
Social Skills	1	2	3	4	5	N/A

Has the Student Ever Been Expelled, Suspended (Including in School Suspension) for any reason: Yes No
If Yes, Please Give Brief Statement of Circumstances:

Do You Feel this Student is Committed to the Goal of Pursuing a Post-Secondary Education: Yes No

Would this Student Benefit from Supplemental Academic Support Services and Educational Opportunities:
 Yes No

Based on my Experience with the Applicant, my Recommendation to Upward Bound is as Follows:
 Do Not Recommend Recommend with Reservations Recommend Highly Recommend

Thank you for taking your valuable time to complete this evaluation. Please use the reverse side of this form to provide additional information or comments about the above named student.

Teacher/Counselor Signature

Teacher/Counselor Printed Name

Date