Girls of Promise™

Teacher Recommendation Form

To be completed by a Teacher who teaches Science, Technology or Math or a Counselor from the School where the student applicant attends.

Thank you for taking the time to complete this recommendation form. Teacher/Counselor recommendations are a vitally important part of the Girls of Promise™ application process. The Selection Committee values your opinion and thanks you for being the kind of teacher/counselor a student seeks out for a recommendation.

**Please:**

1. **Provide the following information**
2. **Save as a PDF**
3. **Upload the following PDF to the application**

**Any recommendation forms received as a Word document will delay the evaluation of the student’s application.**

**Required information:**

**Name of Teacher/Counselor Providing Recommendation:**

**Please provide first and last name as listed on your Teacher/Counselor License:**

**Name of Student Being Recommended:** (Last name, first name. *Example: Simmons, Eleanor*)

**Name of School:**

*Enter the full name of the Middle School without abbreviations.*

Listed below are some behavioral characteristics of gifted students. The more specific the information and the more complete your responses are, the more helpful this will be for the selection committee.

**Please share evidence of the student’s creativity:**

**Please speak to the student’s ability to be self-directed:**

**Please give an example of when the student demonstrated critical thinking:**

**Please describe a time when the student displayed maturity of character:**

**Will you be attending with the student?**

*If yes, please complete Teacher/Counselor Application Form at girlsofpromise.org/join/chaperones/*

*Student Application ID No. can be provided by Women’s Foundation of Arkansas staff or a Girls of Promise committee member.*