



BHS

VPA Department

TEACHER RECOMMENDATION FORM

Student Name:

VPA Discipline Applying for:

This section is to be filled out by current teachers, coaches or mentors of the applicant. Recommending teachers must know the student's potential and degree of commitment. The applicant must submit these completed forms with all other required application materials. An incomplete application will not be processed. Please check the appropriate description for the following items.

	Unsatisfactory	Acceptable	Above Average	Superior	No Observation Opportunity
Commitment					
Grades					
Attendance					
Respect for Others					
Self-Discipline					
Completes Assignments					

Additional Comments:

Has the student received discipline referrals? _____ Reason for referral, if applicable:

Recommender's Name: _____ Subject Taught: _____

Recommender's Signature: _____ School/organization: _____

Date: _____

Please complete the form and return, in a sealed envelope, to: Nancy Wachendorf, or send by email to nancy.wachendorf@sarasotacountyschools.net (941)355-2967 ext. 65211.