



SBS Sahyog

Recommendation Form

(in support of Student Participation Application)

1. Student's Name _____ Class & Section _____

2. How long have you known the student for and in what capacity?

3. Please assess the student on the following:

a. Sincerity (on a scale of 1-10) _____ b. Dependability (on a scale of 1-10) _____

c. Moral compass (place "x" on the scale)

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Do the right thing

Do what serves my interest

4. Key Strengths:

5. Key Areas of Development/Concern:

6. Overall Recommendation (please select one)

Highly Recommended

Recommended

Might be considered

Not Recommended

Please explain the reason for the overall recommendation:

Signature _____ Date _____

Full Name _____ Department _____