STUDENT'S NAME:	 FORM #

## ROME CITY SCHOOLS CHEERLEADING

## TEACHER EVALUATION

## DO NOT RETURN TO THE STUDENT

Please return this form to Coach Kristin Hall at Rome Middle School via courier by April 7th.

## **ALL INFORMATION IS CONFIDENTIAL!**

TEACHER	SUBJECT			APPROXIMATE GPA				
DEAR CLASSROOM TEACHER ALL PARTICIPANTS OF ROME TEACHER EVALUATIONS TO A INTERACT DAILY WITH THE S CREDENTIALS AS A POSITIVE FORM WILL BE USED AS A SU DETERMINE WHETHER OR NO	HIGH SCHOOL CHEEF ALL OF THEIR CURRE TUDENT AND CAN GI REPRESENTATIVE OI PPLEMENTAL SOURC	NT TEACHERS. Y IVE INSIGHT TO I F THE SCHOOL. P E FOR TRYOUTS.	YOU, AS MANY O LEASE U THIS FO	THEIR C F THE ST JNDERST ORM ALC	LASSRO FUDENT FAND TI ONE WI	OOM TE. F'S HAT TH LL NOT	ACHER, IS	
E = EXCELLENT	G = GOOD	F = FAIR		U = UNSATIFACTORY				
			E	G	F	$\mathbf{U}$		
A.) PROJECTS A POSITIVE ATTIT	UDE TOWARD CLASSMA	ATES:						
B.) PROJECTS A POSITIVE AT	ΓΙΤUDE TOWARD TEA	CHER:						
C.) EAGERNESS TO PARTIPAT	E IN CLASS:							
D.) FOLLOWS CLASSROOM/SO	CHOOL RULES:							
E.) DEMONSTRATES TEAMWO	ORK IN GROUP ACTIV	ITIES:						
F.) DEPENDABLE:								
G.) SELF-MOTIVATED:								
H.) RESPONSIBLE:								
I.) ACADEMIC STANDING:								

COMMENTS: PLEASE FEEL FREE TO ADD ANY ADDITIONAL HELPFUL COMMENTS BELOW. THANK YOU.