

Teacher Cadet Application Packet

Application, Essay, & Teacher Recommendation Form

Application Instructions:

- Please complete the form below and return to _____ by _____.
- You will not be considered for admission into the Teacher Cadet Program until at least five teacher recommendations and essay have been received.

First Name Middle Name Last Name

Address _____

City State Zip Phone Number(s)

Parent(s) /Guardian(s) Name(s) _____

E-Mail _____

Number of school days absent last year _____ GPR/GPR _____

Dual/AP/Honors courses you have taken:

_____	_____
_____	_____
_____	_____
_____	_____

Courses (other than the Teacher Cadet class) you plan to take next year:

_____	_____
_____	_____
_____	_____
_____	_____

References (List five teachers to whom you gave reference forms.)

_____	_____
_____	_____

Essay

Choose **one** of the following questions to answer in essay form. You may write or type your answer in the space below.

1. Tell me about a teacher who has had a positive influence on you.
2. Why are you interested in enrolling in the Teacher Cadet Program?

Teacher Recommendation for Teacher Cadet Applicant

Applicant's Name _____

Teachers, do not return this form to the student because your responses are confidential. Please return this recommendation form to me by placing it in my teacher's box or bringing it to my classroom. Please turn in all recommendations by the deadline of _____. Your feedback is important in the selection of the students best suited for this class. Thank you for your interest in and support of the Teacher Cadet Program.

Teacher Cadet Instructor

Using a scale of 1 (weakest) to 5 (best), please rate this Teacher Cadet applicant in the following areas. You may select DK if you don't know how to respond to a category.

1 2 3 4 5 DK

Professional Appearance/Grooming						
Poise						
Sensitivity to Others						
Leadership Skills						
Dependability/Commitment						
Integrity						
Ability to Accept Constructive Criticism						
Ability to Work in Groups						
Creativity						
Intelligence						
Academic Achievement						
Communication/Grammar/Writing Skills						
Motivation/Willingness to Work						
Potential as an educator						
Attendance						

Please include comments to help the selection committee make wise choices for the Teacher Cadet Program. Continue on the back of this form if you need additional space.

Comments:

Your Name _____

How long have you known the applicant? _____

Thanks! Please return this recommendation form to _____.