

CANDIDATE INSTRUCTOR NOMINATION

CONFIDENTIAL

These forms are optional and for school use only.

PLEASE DO NOT RETURN TO NTHS

Student _____ Date Submitted _____

Class Year _____ Department _____ Instructor _____

Please complete the following information for each nominee.

1. Is this student seriously interested in pursuing a career in his/her field of study? _____

2. Student's rank in class _____ of _____ students. Grade Average _____

3. What are the student's goals following graduation? _____

4. Previous work experience _____

What type, how long? _____

5. Please check appropriate box

- | | | |
|---|------------------------------|-----------------------------|
| a. Follow instructions | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| b. Attends class regularly | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| c. Safety conscious | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| d. Exhibits good teamwork skills | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| e. Takes pride in work | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| f. Is dependable, responsible, honest | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| g. Exhibits positive attitude | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| h. Exhibits leadership & good citizenship | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| i. Shows initiative | <input type="checkbox"/> yes | <input type="checkbox"/> no |

6. I recommend this student as a member of NTHS with:

- no reservations few reservations some reservations

Please explain _____

7. List other accomplishments of candidate _____

NOTE FOR INSTRUCTOR:

Submit this completed form for each student nominated to the administration by _____.

This is confidential information not to be shared with others (teachers or students).

FOR OFFICE USE ONLY: Recommended Not Recommended Need more information

Date _____ By _____

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