The University of Akron * Firestone Fellows Strive Toward Excellence Program

64 Buckingham Center * Akron, OH 44325-7910 * 330.972.6683

GUIDANCE COUNSELOR / PRINCIPAL RECOMMENDATION

The individual named below is applying for admission to the Firestone Fellows Strive Toward Excellence Program, a precollege preparatory program at The University of Akron. We are interested in attracting quality applicants who wish to pursue a college education upon graduation from high school. We appreciate your assistance in aiding us in the evaluation of the applicant. Please return and attach a copy of the applicant's Student Transcript Report including IEP, if applicable and current report could to the address below

APPLICANT NAM	PPLICANT NAME					
Mark only <u>one</u> box tha	t best applies to the	e applicant.				
	Excellent	Good	Average	Below Average	No Basis	Please indicate on the reverse side of this form any special
Leadership						circumstances in the student's background or home life that
Dependability						could help us to better evaluate this applicant. <i>Include any</i>
Self-Confidence						serious or repeated disciplinary actions, suspensions or
Rapport with peers						absences for an extended period.
Rapport with adults						
Capacity for hard work						Overall Recommendation Enthusiastically recommend
Manners						□ Recommend
Academic Achievement						☐ Recommend with reservation
Motivation						□ Do NOT recommend
Maturity						
Behavior						
						Signature
	Re	commend	er Information	on_		Toward Etce
All recommenda	tions must be re	eceived in our	office no later t	han Friday, Fe	bruary 16, 2018	Toward Etc.

Name of Guidance Counselor (Please Print) School School Address City Zip Code E-mail Address



RETURN FORM BY

MAIL:

The University of Akron Strive Toward Excellence Program Buckingham Center, Room 64 Akron, OH 44325-7910

> SCAN: carlucc@uakron.edu

> > FAX. 330.972.8658

ADDITIONAL COMMENTS

APPLICANT NAME: G	RADE:



MATH TEACHER RECOMMENDATION

All recommendations must be received in our office no later than Friday, Fe	∃ebruary 1	6, 2018.
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APPLICANT NAME GRADE						
The individual named above, has applied for admission into The University of Akron's Strive Toward Excellence Program (STEP). STEP is a unique college preparatory program for select students in the Akron area. A prerequisite for program admission consideration is a recommendation from the student's Math teacher. We appreciate the time and effort that you will be taking to provide us with your assessment of the applicant.						
Academic	CS					
Part I: Plea	ase mark the appropriate boxes th	nat best describes the	applicants overall	academic performand	e in your class.	
		Above Grade Level	At Grade Level	Below Grade Level		
	Oral Expression					
	Creativity					
	Test & Quiz Results					
	Teamwork					
	Organized					
Part II: Ple	ase mark the appropriate boxes t	hat best describes the	e applicants overall	academic performan	l ce in your class.	
					Check box if statement is accurate	
Does n	ot study					
Missing	g homework					
• The ap	plicant has low quizzes and/or tes	st scores				
Lacks of being to the control of the control o	classroom participation because h aught	ne/she does not unde	rstand the goals an	d objectives of what is	5	
	to understand the concept(s), bu eeded to be successful in my class		and demonstrates	the hard work and		
Could I	penefit from tutoring or extra cred	it				
• Works	at grade level					
Not wo	rking at grade level					
Part III: Do you believe that the student is working up to his/her full potential? Yes No If not, what do you believe is the hindrance that is preventing them?						

Over

Behavior

Part I: Please mark the appropriate boxes that best describes the applicants overall behavioral performance in your class.

	Above Grade Level	At Grade Level	Below Grade Level
Ethics and Integrity			
Self-Confidence			
Attitude			
Dependability			
Motivation			
Peer Relations			
Behavior			
Parental Involvement			
Leadership Characteristics			

Part II: Please mark the appropriate boxes that best describes the applicants overall behavioral performance in you	r class.
	Check box if statement is accurate
 Excessively talks during class and his/her grade along with citizenship mark reflect this behavior 	
 Lacks classroom participation, but focuses on peer relationships during classroom instruction 	
 Displays poor attitude during redirection of behavior and does not take ownership of his/her poor choices 	
Demonstrates leadership roles in the classroom and uses all resources to access support systems, if needed	
 Works hard at modeling appropriate behavior in the classroom setting and it reflects in his/her grade and/or citizenship mark 	
Respects authority	
Part III: Please indicate any special circumstances in the student's background or home life that could help us bette applicant. <i>Include any serious or repeated disciplinary actions, suspensions or absences for an extended period.</i>	r evaluate this

Recommende	er Information	Overall Recommendation
Name of Teacher (Please Print)	MATHSubject	□ Enthusiastically recommend □ Recommend □ Recommend with reservation
School School		□ Do NOT recommend
School Address	City Zip Cod	_ e
E-mail Address		Signature

FORMS MAY BE RETURNED BY

MAIL The University of Akron Strive Toward Excellence Program Buckingham Center, Room 64 Akron, OH 44325-7910

SCAN carlucc@uakron.edu FAX 330.972.8658



ENGLISH TEACHER RECOMMENDATION

All recommendations must be received in our office no later than Friday, February 16, 2018	All recommendations must be	received in our	office no later than	Friday.	February	<i>1</i> 16.	2018
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ΑP	PLICANT NAME _				GRA	DE
(ST adr	EP). STEP is a ι mission considera	d above, has applied for unique college preparato tion is a recommendatio provide us with your ass	ory program for select n from the student's	t students in the Al English teacher. V	ron area. A prerequi	site for program
Ac	ademics					
Pa	t I: Please mark t	the appropriate boxes th	at best describes the	applicants overall	academic performanc	ce in your class.
			Above Grade Level	At Grade Level	Below Grade Level]
		Oral Expression				
		Creativity				
		Test & Quiz Results				
		Teamwork				
		Organized				
Pai	t II: Please mark	the appropriate boxes th	nat best describes the	e applicants overall	academic performan	ı ce in your class.
						Check box if statement is accurate
•	Does not study					
•	Missing homewo	rk				
•	The applicant ha	s low quizzes and/or tes	t scores			
•	Lacks classroom being taught	participation because h	e/she does not unde	rstand the goals ar	nd objectives of what i	s
•		stand the concept(s), but be successful in my clas		and demonstrates	the hard work and	
•	Could benefit fro	m tutoring or extra credi	t			
•	Works at grade I					
•	Not working at g	rade level				
Pai	t III: Do you belie	eve that the student is wo			No	

Over

Behavior

Part I: Please mark the appropriate boxes that best describes the applicants overall behavioral performance in your class.

	Above Grade Level	At Grade Level	Below Grade Level
Ethics and Integrity			
Self-Confidence			
Attitude			
Dependability			
Motivation			
Peer Relations			
Behavior			
Parental Involvement			
Leadership Characteristics			

Pai	rt II: Please mark the appropriate boxes that best describes the applicants overall behavioral performance in you	ir class.
		Check box if statement is accurate
•	Excessively talks during class and his/her grade along with citizenship mark reflect this behavior	
•	Lacks classroom participation, but focuses on peer relationships during classroom instruction	
•	Displays poor attitude during redirection of behavior and does not take ownership of his/her poor choices	
•	Demonstrates leadership roles in the classroom and uses all resources to access support systems, if needed	
•	Works hard at modeling appropriate behavior in the classroom setting and it reflects in his/her grade and/or citizenship mark	
•	Respects authority	
	rt III: Please indicate any special circumstances in the student's background or home life that could help us bette plicant. <i>Include any serious or repeated disciplinary actions, suspensions or absences for an extended period.</i>	er evaluate this

	Recommender Information		Overall Recommendation
		ENGLISH	☐ Enthusiastically recommend
Name of Teacher (Please Print)		Subject	□ Recommend
			☐ Recommend with reservation
School			□ <u>Do NOT recommend</u>
School Address	City	Zip Code	
E-mail Address			Signature
E man Addi 600			Signature

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