

HOSA TEACHER RECOMMENDATION FORM

Student Name _____

Subject Taught to Student _____

Teacher Name Printed _____

Teacher Signature _____

Please rate this student on the following:

Characteristic	GROUP MEMBER GRADE				
Reliability	1	2	3	4	5
Responsibility	1	2	3	4	5
Work Habits	1	2	3	4	5
Cooperation / Attitude	1	2	3	4	5
Attendance	1	2	3	4	5

(5 is the highest)

Teacher Input – (Please input any information that you feel is important about this student.)

Please send to Ms. Cardo via email

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