JMMS Stars Dance Team Candidate Teacher/Coach Recommendation

After completing the recommendation for the candidate, please place in

a sealed envelope and sign over the seal.

Teacher or Coach:

| Dance Candidates: | Dancers should provide a printed copy and envelope to their teacher or coach. Please return 4 recommendations to coaches prior to Tryout Clinics. | | | | | |
|-----------------------|---|---|---|---|-----------------|-------------------|
| Please evaluate the o | | | | | eing the highes | t score possible. |
| Candidate: _ | | | | | | |
| Attitude: | | | | | | |
| | 1 | 2 | 3 | 4 | 5 | |
| Work Ethic: | | | | | | |
| | 1 | 2 | 3 | 4 | 5 | |
| Attendance / Pu | unctuality: | | | | | |
| | 1 | 2 | 3 | 4 | 5 | |
| Responsibility: | | | | | | |
| | 1 | 2 | 3 | 4 | 5 | |
| Ability to work | with others: | | | | | |
| | 1 | 2 | 3 | 4 | 5 | |
| Total: | / 25 | | | | | |
| Additional Con | nments: | | | | | |
| | | | | | | |
| | | | | | | |
| Signature: | | | | | Oate: | |