

**Milton High School Cheerleading
Teacher Recommendation Form
Due: March 8th**

The following athlete is trying out for one or more Milton Cheerleading Squads.

Athlete's Name: _____

Grade: _____

Please rate the athlete on each of the categories below. Place an X in the appropriate column. This information is confidential, so please be honest.

	Needs Help	Fair	Average	Good	Excellent
Attendance					
Punctuality					
Responsibility					
Dependability					
Collaboration					
Motivation					
Leadership					

Do you feel this athlete is a good representation of Milton High School? Circle one. YES NO

Please share any concerns: _____

Teacher Name: _____

Please do not give the form back to the athlete. You may place the form in Stacy Johnson's mailbox or bring to 5308 by March 8th. Thank you for taking the time to complete this form.