

**INSTITUTE OF CREATIVE PROBLEM SOLVING
FOR GIFTED AND TALENTED STUDENTS**
MATHEMATICS TEACHER RECOMMENDATION

Student Name _____ **Current Grade** _____

1. How well do you know the above student? How does he/she perform in class?

2. Does he/she appear to have interest and ability in math, technology, or science? Why do you think so?

3. Does the student demonstrate a positive attitude toward academics? Please cite an example.

4. What background experience does the student have which will enable him/her to benefit from this program? What personal characteristics of the student would support your comment?

5. In your opinion, does the student perform better in an individual or a group setting?

(Please print clearly)

Teacher's Name (Print): _____ **Date** _____

Grade/Course Taught: _____

School Name and District: _____

Phone Number: _____

Email: _____

Teacher's Signature _____

PLEASE RETURN WITH COMPLETED STUDENT APPLICATION