

CLASS OF 2021
EHS Counseling Department
11th/12th GRADE TEACHER FEEDBACK FORM

Student Name _____ Today's Date _____

Teacher _____ Counselor _____

I was enrolled in your _____ class in _____ grade.

***This form is available in the T-share (Guidance file) should you prefer to type your responses.
We appreciate your honest, thoughtful and thorough feedback.***

❖ **ACADEMIC QUALITIES**: Please describe this student's work ethic, study habits and attitude about academics. Examples or anecdotes are greatly appreciated.

❖ **PERSONAL QUALITIES**: What are his/her most positive personal attributes? How did s/he influence your class or other students? Examples or anecdotes are greatly appreciated.

Please return this form to the Counseling Office by June 7, 2019. Thank you.