**SAMPLE FACULTY EVALATION FORM—THIS IS TO PROVIDE GUIDANCE ONLY**

**National Junior Honor Association**

**Faculty Evaluation Form**

**(Name) Lutheran School**

The following students have been identified as candidates for selection to our chapter of Lutheran Junior Honor Association. Candidacy begins by meeting our Academic criterion of (# or %) which has been met by these students. Each candidate will submit to the Faculty Panel a student information sheet, but additional information is being requested from the entire faculty to assist in this important selection process. Every faculty member is being asked to review, sign, and return this form.

Please carefully review the list of candidates. For each of the criteria, please use the rating scale of (Create scale: Example: 1-4 with 1=low/poor, 2=below average, 3=good, 4=high/outstanding) to evaluate any student with whom you have had professional interaction.

Guidelines to help you make decisions are as follows:

A student who exercises **leadership**:

* Exercises influence on peers in upholding school ideals.
* Exemplifies positive attitudes.
* Inspires positive behavior in others.
* Demonstrates academic initiative.
* Is a forerunner in the classroom, at work, and in school or community activities.
* Is thoroughly dependable in any responsibility accepted.

A student who **serves**:

* Is willing to uphold scholarship and maintain a loyal school attitude.
* Participates in some outside activity: Girl/Boy Scouts; church groups; volunteer services for the aged, poor, or disadvantaged; family duties.
* Volunteers dependable and well-organized assistance, is gladly available, is willing to sacrifice to offer assistance.
* Works well with others and is willing to take on difficult or inconspicuous responsibilities.
* Cheerfully and enthusiastically renders any requested service to the school.
* Shows courtesy by assisting visitors, teachers and students.

Please sign the bottom of the form. In the event that you have had no professional interaction with a student, please attest to that by writing N/A in the box.

All forms should be returned to (name) by (date). Your cooperation in this important selection process is greatly appreciated

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| **Candidate’s Name** | **Service** | **Leadership** |
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Signature Date