

## **SAMPLE ONLY - USE ONLINE VERSION**

2022-2023 Florida Teacher Recommendation for the U.S. Senate Youth Program

## **Teacher Recommendation**

The United States Senate Youth Program (USSYP) is a unique educational experience for outstanding high school students and an opportunity for motivated student leaders to have direct contact with the highest-level elected and appointed officials in the nation. The USSYP mission is to encourage the best and brightest students in America's high schools to pursue careers in public service. To learn more about USSYP visit: <a href="https://ussenateyouth.org/">https://ussenateyouth.org/</a>. For information on USSYP in Florida, visit: <a href="https://www.fldoe.org/civicliteracy/ussyp.stml">https://www.fldoe.org/civicliteracy/ussyp.stml</a>.

**This form** is the teacher recommendation for a student applying to the United States Senate Youth Scholarship program as the Florida delegate. The responses you provide will be used to score the eligible candidate.

## **IMPORTANT:**

 The deadline for this online recommendation form to be submitted is 11:59 p.m. October 7, 2022.

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| * 3. RECOMMEN  | DING TEACH       | ER'S INFORM    | IATION     |                  |                       |
|--|------------------|----------------|------------|------------------|-----------------------|
| Name of Teacher<br>Providing<br>Recommendation<br>(First and Last Name)                        |                  |                |            |                  |                       |
| Work Email Address<br>of the Teacher<br>Providing this<br>Recommendation                       |                  |                |            |                  |                       |
| Work Phone Number<br>of the Teacher<br>Providing this<br>Recommendation<br>(Include Area Code) |                  |                |            |                  |                       |
| * 4. In what capa  | city do you kn   | ow the studen  | t?         |                  |                       |
|  |                  |                |            |                  |                       |
|  |                  |                | <u> </u>   |                  |                       |
| * 5. How long h  | nave you know    | vn the student | applicant? |                  |                       |
| Less Than Or   | ne Year One      | e Year Two     | Years Th   | nree Years Fo    | our Years or more     |
|  |                  |                |            |                  |                       |
| * 6. YOUR ASSE   | SSMENT OF        | STUDENT AP     | PLICANT    |                  |                       |
| Please provide an a categories indicate  |                  |                |            |                  |                       |
| Merit  |                  |                |            |                  |                       |
|  | Not Able to Rate | Below Average  | Average    | Above Average    | Well Above<br>Average |
| Academic<br>Achievement  | $\bigcirc$       |                |            |                  |                       |
| Leadership Skills  |                  |                |            |                  |                       |
| Commitment to<br>Service   | $\bigcirc$       | $\circ$        | $\bigcirc$ | $\circ$          | $\circ$               |
| Contributions to<br>Class, School, or<br>Community   | $\bigcirc$       | $\bigcirc$     |            | $\circ$          |                       |
| * 7. Character   |                  |                |            |                  |                       |
|  |                  |                |            |                  |                       |
|  | Not Ablo to Pato | Polow Avorago  | Average    | Above Average    | Well Above            |
| Respect for Others   | Not Able to Rate | Below Average  | Average    | Above Average    | Well Above<br>Average |
| Respect for Others Self-Discipline   | Not Able to Rate | Below Average  | Average    | Above Average    |                       |
|  | Not Able to Rate | Below Average  | Average    | Above Average    |                       |
| Self-Discipline  | Not Able to Rate | Below Average  | Average  O | Above Average  O |                       |

|  | nal & Commu                             |                |              |  |                       |
|--|---|----------------|--------------|--|-----------------------|
|  | Not Able to Rate                        | Below Average  | Average      | Above Average                          | Well Above<br>Average |
| Ability to interact effectively with others                                      | $\bigcirc$                              | $\bigcirc$     | $\bigcirc$   | $\bigcirc$                             | $\circ$               |
| Ability to communicate effectively with others                                   | $\circ$                                 | $\circ$        | $\circ$      |  | $\bigcirc$            |
| Open to multiple perspectives  | $\circ$                                 | $\circ$        | $\bigcirc$   | $\circ$                                | $\circ$               |
| Respects diversity among groups and individuals                                  | $\bigcirc$                              | $\circ$        | $\bigcirc$   | $\circ$                                | $\circ$               |
| Seeks to<br>understand rather<br>than make a<br>judgement                        | $\circ$                                 | $\circ$        | $\circ$      | $\circ$                                | $\bigcirc$            |
| <b>★</b> 9. <b>WRITTEN R</b>   | ECOMMEND <i>A</i>                       | ATION OF THE   | STUDENT      |  |                       |
| Note: If you are not copaste it into the span DO NOT MAIL OR EMSUBMITTED USING T | ce below<br>AIL YOUR RECOM<br>HIS FORM. | MENDATION. YOU |              |  |                       |
| I affirm that the  | ne student for qualities and o          | whom this reco | that align v | on has been pro<br>vith the eligibilit |                       |

| 11. TEACHER CONFIRMATION  |  |
|---|--|
| I affirm that I am the teacher identified in this recommendation and that I am the author of the content submitted. |  |
| Type full name as confirmation.   |  |
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