

*Teachers: Please complete and return to your student or mail to
STEM Program, 77 Massachusetts Ave., Rm. 1-123, Cambridge, MA 02139
DEADLINE: Monday, March 3, 2008*

SCIENCE TEACHER RECOMMENDATION FORM (Please complete all 3 Sections!)

Student: _____ School: _____ Grade Level: _____ Date: _____

Teacher Name: _____ Subject: _____ Signature: _____

I. Section One. The student is applying to a rigorous program at MIT. Please check the appropriate boxes below.

	Excep- tional (top 5%)	Superior (top 10%)	Average	Satisfac- tory	Needs Im- prove- ment	Not Ob- served
Possesses a comfortable knowledge of basic skills and factual information						
Has ability and desire to follow through on work; is able to see a problem through to the end.						
Pursues interests to understand or satisfy curiosity; wants to know how and why						
Generates questions on his/her own; questions the common, ordinary or unusual						
Enjoys the challenge of difficult problems, assignments, issues, and materials						
Requires a minimum of adult direction and attention; is able to do independent work						
Completes homework and other assignments on time						
Is able to function effectively in a group						
Consistently does high quality work						
Seems self-confident, happy and comfortable in most situations						
Is able to cope with normal frustrations; adapts well to change						
Is receptive to new tasks or experiences; takes reasonable risks						
Attends class regularly						

II. Section Two. How strongly would you recommend this student to the STEM Program? *Please circle one:*

-- Very Strongly -- Strongly -- With Reservation -- Not At All --

III. Section Three. Please evaluate and comment on the student's academic and social development and/or undeveloped potential on your letterhead; enclose that document in a sealed envelope.