

Teacher Assistant Program (TA) and Peer Tutor Program (PT) 2021-22

Student Name _____ Student ID # _____

To be eligible a senior must have at least 20 credits and have 10 or less absences in the prior semester. Students must complete this application and submit one Teacher Recommendation (on the back of this form) by September 4, 2021. Students will be placed at the discretion of Mrs. Carpino, Dean of Student Services. The goal of this program is to provide students with an opportunity to support our school through helping other students, supporting the greater Sanderson community and through learning interpersonal and office skills that will add to your own growth.

****Please list two elective courses you are willing to exchange in order to have TA or PT added to your schedule:**

1) _____ or 2) _____

Please all check areas in which you are interested in supporting:

- _____ Student Services office TA
- _____ TA for a teacher and/or dept. If you have a preference for teacher, list that name here: _____
- _____ Peer tutor for Math 1
- _____ Peer tutor for English 1
- _____ TA for Special Ed/Pals self contained classroom

Please read and sign below:

I am requesting administrative review for placement in the Teacher Assistant Program or Peer Tutor Program and understand that the purpose of the program is to provide assistance to Sanderson High School. If accepted I agree to attend, comply with requests, complete work in a timely manner and adhere to all school rules and policies.

Student Signature _____ Date _____

Parental Consent

As the parent of the student named above, I give my consent for him/her to request review for placement in the TA program for the upcoming school semester.

Parent Name (please print) _____

Parent Signature _____ Date _____

Due Date:

- Both the Application and Recommendation are due back by **September 4, 2020**. Completed forms can be turned in to in Student Services. Please follow your current class schedule until you are notified of any changes.

Confidential Teacher Recommendation for TA or PT Position

Student Name _____

Please consider the applicant carefully and consider whether he or she would be successful in fulfilling Teacher Assistant responsibilities for you. Please rank the student in each category. A rank of 5 means the student ALWAYS demonstrates a high level of competency in this category; a rank of 1 means the student never demonstrates this competency in this quality; N/O means you did not have an occasion to observe this quality. Additional comments are appreciated and can be continued on the reverse side of this page. Upon completion, place in the envelope provided by the student and sign across the seal.

Category	Ranking						Comments
On time to class	1	2	3	4	5	n/o	
Meets Deadlines	1	2	3	4	5	n/o	
Completes Assignments	1	2	3	4	5	n/o	
Trustworthy	1	2	3	4	5	n/o	
Works Well with Others	1	2	3	4	5	n/o	
Participates in Class	1	2	3	4	5	n/o	
Makes Positive Contributions to Class	1	2	3	4	5	n/o	
Maturity	1	2	3	4	5	n/o	
Writing Skills	1	2	3	4	5	n/o	
Research Skills	1	2	3	4	5	n/o	
Leadership Skills	1	2	3	4	5	n/o	
Work Ethic	1	2	3	4	5	n/o	
Open-Mindedness	1	2	3	4	5	n/o	
Motivation	1	2	3	4	5	n/o	
Attitude	1	2	3	4	5	n/o	

Additional Comments:

Teacher Name _____

Specific Relationship to Applicant (English teacher, math teacher, etc.) _____

Signature of Teacher _____ Date _____