

Ratings

Please circle the appropriate response for each quality possessed by the student

Motivation	Outstanding	Above Average	Average	Below Average
Maturity	Outstanding	Above Average	Average	Below Average
Leadership	Outstanding	Above Average	Average	Below Average
Social	Outstanding	Above Average	Average	Below Average
Emotional	Outstanding	Above Average	Average	Below Average
Ethics	Outstanding	Above Average	Average	Below Average

Please provide comments concerning this student in general and on your thoughts of his/her applying to GAMES? _____

Signature

Please Print Name

Signature

Date

High School _____

Thank you for taking the time to complete this form!

You may return this form to the student or mail within 14 days of receipt to:

GAMES Admissions
1100 Second Street
Cochran GA 31014