

## Freedom to Learn Male Mentoring Program

### Halifax Community College Faculty Recommendation Form

**Part A:**

Student's Name: \_\_\_\_\_

School: Halifax Community College

Instructor/Counselor: \_\_\_\_\_

Course Taught: \_\_\_\_\_

How long have you known the student? \_\_\_\_ less than 1 yr. \_\_\_\_ 1 yr. \_\_\_\_ 2 yrs. \_\_\_\_ more than 2 yrs.

Please rate the student according to your observation or knowledge:

	Poor	Fair	Average	Good	Excellent	N/A
1. Attitude towards school work	1	2	3	4	5	0
2. Intellectual ability	1	2	3	4	5	0
3. Ability to follow rules, and accept consequences.	1	2	3	4	5	0
4. Communication skills	1	2	3	4	5	0
5. Study skills/habits	1	2	3	4	5	0
6. Responsibility	1	2	3	4	5	0
7. Concern for other/ interpersonal skills	1	2	3	4	5	0
8. Goals orientation	1	2	3	4	5	0
9. Academic ambition	1	2	3	4	5	0
10. Ability to perform college work	1	2	3	4	5	0

**Part B:**

1. Does the student possess the academic ability to earn a college degree?  
( ) Yes ( ) No

Instructor's/Counselor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Please rate the student according to your observation or knowledge:

	Poor	Fair	Average	Good	Excellent	N/A
11. Attitude towards school work	1	2	3	4	5	0
12. Intellectual ability	1	2	3	4	5	0
13. Ability to follow rules, and accept consequences.	1	2	3	4	5	0
14. Communication skills	1	2	3	4	5	0
15. Study skills/habits	1	2	3	4	5	0
16. Responsibility	1	2	3	4	5	0
17. Concern for other/ interpersonal skills	1	2	3	4	5	0
18. Goals orientation	1	2	3	4	5	0
19. Academic ambition	1	2	3	4	5	0
20. Ability to perform college work	1	2	3	4	5	0

**Part B:**

2. Does the student possess the academic ability to earn a college degree?  
( ) Yes ( ) No

Instructor's/Counselor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_