Penn GEMS Summer Camp Teacher Recommendation Form

TO THE STUDENT: Enter your name here

_________________________________________________________________________________

Ask a teacher who has taught you mathematics, science or humanities within the past two years to complete this form and return it to you in a sealed envelope. Send it in with the rest of your application.

TO THE TEACHER: The student above has applied to the Penn GEMS summer program offered by the School of Engineering and Applied Science at the University of Pennsylvania.

Program Description:
The GEMS Summer Camp is dedicated to providing hands-on activities to engage middle school girls in applied science, technology and engineering.

Goals:
* To introduce engineering to girls through nanotechnology, materials science, bioengineering, graphics and computing.
* To make connections with role models and mentors that will help them to visualize themselves as engineers.
* To encourage girls to continue studying math, science and computing and to think about studying engineering in college.
* Emphasis on real-world problem solving, collaboration, teamwork and building self-efficacy.

Eligibility
- Is currently a 6th, 7th or 8th grader
- Has at least a B average

How long have you known the applicant?
_________________________________________________________________________________

In what capacity?
_________________________________________________________________________________

1. Rate the student on evidence you have seen of mathematics potential. Circle your rating on the scale below (1 = lowest; 5 = highest).

1 2 3 4 5

Please add comments to elaborate on your rating:
2. Rate the student on evidence you have seen of science potential. Circle your rating on the scale below (1 = lowest; 5 = highest).

1 2 3 4 5
Please add comments to elaborate on your rating:

3. Rate the student’s ability to work in a group (1 = lowest rating, 5 = highest rating).

1 2 3 4 5
Please add comments to elaborate on your rating:

4. Rate the student’s ability to work independently (1 = lowest rating, 5 = highest rating).

1 2 3 4 5
Please add comments to elaborate on your rating:

5. Please comment on the student’s maturity.

6. Please indicate what grade you have given the student on their most recent report card

7. Please make additional comments that would be useful to the selection committee.

Teacher’s name (print) _____________________ Teacher’s signature _____________________
Date signed: _____________________________ Email _____________________________
School name and address: ________________________________

Please return this form to the student in a sealed envelope, and sign your name across the seal.