

**NOTRE DAME ACADEMY  
SENIOR PROJECT - 2010**

SPONSOR EVALUATION OF STUDENT

STUDENT'S NAME \_\_\_\_\_

Please keep a record of the number of student hours spent each day at Senior Project.

Day 1 hrs \_\_\_\_ Day 2 hrs \_\_\_\_ Day 3 hrs \_\_\_\_ Day 4 hrs \_\_\_\_ Day 5 hrs \_\_\_\_ Day 6 hrs \_\_\_\_ =  
Total Hrs. \_\_\_\_

The following scale may be a helpful guide in evaluating the student:

4 = Excellent            3 = Good            2 = Fair            1 = Poor

- |                        |                                      |
|------------------------|--------------------------------------|
| _____ 1. Courtesy      | _____ 6. Seriousness of Purpose      |
| _____ 2. Dependability | _____ 7. Acceptance of Suggestions   |
| _____ 3. Initiative    | _____ 8. Interest and Motivation     |
| _____ 4. Punctuality   | _____ 9. Ability to work with others |
| _____ 5. Appearance    | _____ 10. Aptitude for this career   |

Please make any additional comments below that would be helpful to us in evaluating the student and the Senior Project Program. Your assistance is greatly appreciated.

Signed \_\_\_\_\_  
Position \_\_\_\_\_  
Organization \_\_\_\_\_  
Date \_\_\_\_\_

If possible, we would appreciate your returning this form by **May 19<sup>th</sup>** to:

Steven Strauss  
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Toledo, OH 43623

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