

***Charlotte Athletic Booster Scholarship
Teacher's Recommendation Form***

TEACHER'S NAME: _____

CLASS(ES): _____

Student Athlete's Name: _____

Please email your completed recommendation to charlotteathleticboosters@gmail.com by Friday, February 24, 2023.

Please provide a response for the following questions.

What was one of the student's most memorable accomplishments or a time when the student displayed exceptional leadership?

How does this student best demonstrate their ability to excel as both a student and student-athlete?

Feel free to provide any observations that would help the committee better assess this applicant's character and/or probability of success in college.

Teacher's Signature

Date