MENTOR REFERENCE FORM

Gifted and Talented Intern/Mentor Program Howard County Public School System

and Talented Resource Teach	ol System. Would you ple ner as soon as possible. Yo	ase compour respo	plete this form and return it to the Gifted onse will assist us in facilitating the student peration are most appreciated.
Please respond briefly to the	following questions about	t the pote	ntial mentor:
Please describe your profe	essional relationship.		
2. How long have you know	n and /or worked with the	potentia	l mentor?
3. How would you recomme	end this person as mentor	for a high	ally able high school student?
() Enthusiastically reco	mmend	()	Recommend with reservations
() Recommend		()	Do not recommend
to the affective needs, develor with. In light of the forgoing school student to learn and p	ppmental growth, and vary g, please comment on this roduce at a high level.	ving intell person's	bject matter, mentors should be sensitive ectual levels of the students they work ability or potential to motivate a high
Signature:	Addro	ess:	
Title:			
Date: Phone:			

The respondent is requested to provide on the back or with appropriate attachments, any data that will substantiate the above information or to add other relevant information. Narrative statements are encouraged.

Please mail to the school-based G/T Resource Teacher.