



Greater Hewitt Chamber Scholarship Student Evaluation  
 Please check the most appropriate box concerning this student.

(Office Use Only: App # \_\_\_\_\_)

**Applicant Name:** \_\_\_\_\_ **Applicant DOB:** \_\_\_\_\_

	No Basis for Judgment	Below Average	Average	Good	Excellent (Top 10%)	Outstanding (Top 2-3%)	One of the top few encountered
1 Creative, original thought							
2 Academic motivation							
3 Independence, initiative							
4 Intellectual ability							
5 Academic achievement							
6 Academic potential							
7 Extracurricular involvement							
8 Leadership							
9 Emotional maturity							
10 Overall							

\*In the space below, please provide any additional information about the student that you would like to share about the applicant. **PLEASE DO NOT REFERENCE THE STUDENT'S NAME IN THE COMMENTS.**

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**Evaluator Name:** \_\_\_\_\_ **Evaluator Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_