

COUNSELOR EVALUATION

Victoria Rotary Club

Student Name

First Name

Last Name

Evaluator Name

First Name

Last Name

Evaluator Title and Institution

Title

School

Evaluator Relationship to Student

Evaluator Phone Number

Area Code

Phone Number

COUNSELOR EVALUATION

Evaluator Email

example@example.com

Evaluation Criteria

	Strongly Agree	Agree	Neutral	Disagree
The applicant has chosen an appropriate postsecondary education program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant's achievements reflect their ability.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant sets realistic and attainable goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant is committed to school and the community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant is able to seek, find, and use learning resources.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant demonstrates curiosity and initiative.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant demonstrates good problem-solving skills, following through with tasks.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The applicant shows respect for self and others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>