

SPARTAN MEDALLION AWARD

Evaluation Form

***Completed evaluations should be returned *by the evaluator* to senior counselor, Mrs. Gibson by**

May 15th, 2022

Applicant's Name: _____

Evaluator's Name & Role _____

LEADERSHIP- Applicant's performance and capacity as a leader.

- 1 - Poor
- 2 - Average
- 3 - Good
- 4 - Outstanding

INTEGRITY & HONESTY- Applicant's ethical and moral values and honesty in communication and conduct.

- 1 - Poor
- 2 - Average
- 3 - Good
- 4 - Outstanding

STRENGTH OF CHARACTER - Applicant's demonstration of kindness, compassion, and humility.

- 1 - Poor
- 2 - Average
- 3 - Good
- 4 - Outstanding

COMMUNICATION & COLLABORATION - Applicant's ability to communicate and work effectively with others as a member of a group or team.

- 1 - Poor
- 2 - Average
- 3 - Good
- 4 - Outstanding

Evaluator's

Signature _____