

ONTARIO SCIENCE CENTRE SCIENCE SCHOOL

CONFIDENTIAL TEACHER RECOMMENDATION REPORT

MAIL THIS FORM TO:

Science School, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3

Please fill out the following recommendation form for this student applying to the Science School at the Ontario Science Centre for the 2019/20 school year. Your comments are very important to the selection process. **This form must be received no later than Tuesday April 7, 2020.**

1. STUDENT AND TEACHER INFORMATION:

Student Name _____

School _____ School Phone _____

Teacher Name _____ Subject _____

In what capacity do you know this applicant?

2. RATING OF STUDENT ABILITIES:

Please rate the student with respect to the following characteristics by placing a check (✓) in the appropriate column.

	not possible to evaluate	below average	average	above average	well above average	exceptional (top 2%)
Positive attitude towards learning						
Ability to work independently						
Willingness to help their peers						
Ability to accept a non-leadership role in group settings						
Ability to accept constructive criticism						
Willingness to accept challenges						
Honesty/integrity						
Written/oral communication						
Creativity						
Involvement in school community						
Punctuality and attendance						
Willingness to ask for help						

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3. REFLECTION OF STUDENT ABILITY:

Students enrolled at the Ontario Science Centre Science School are required to:

- take a minimum of **two** 4U science/math courses plus the Innovation Course (IDC4U)
- regularly facilitate interactive science activities with visitors to the Ontario Science Centre
- regularly assist with science workshops for (K-12) students from visiting schools
- have an appreciation for diversity and equality and the ability to work with diverse groups based on age, language, cultural background and gender identity
- responsibly manage the high level of autonomy and high course load of Science School

1. Based on the requirements listed above, do you believe this student will be successful at Science School?

Very strongly Strongly, but they may need additional support Unsure No

2. How does this student interact with their peers when not in a leadership role? Please give an example.

3. Comment on this student's resiliency. Share an example of how they have demonstrated this skill.

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4. Do you foresee any challenges this student may face? Explain.

SIGNATURE: _____ DATE _____

This teacher recommendation report is confidential and should be submitted in a sealed envelope with your signature on top of the seal (students should not be informed of its contents.)

Thank you for your comments. If you have any questions, please contact the Education and Special Programs Coordinator at 416-696-4620 or e-mail: science.school@ontariosciencecentre.ca This information is collected under the authority of the Centennial Centre of Science and Technology Act for registration purposes. Questions about this collection should be directed to: Director, Education, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3 Phone: 416-696-4601