



## INSTRUCTOR FEEDBACK FORM

(Provide SATC with name and email address of instructor)

This form is for students applying for admittance into a Salina Area Technical College Welding Program.

Student's Name \_\_\_\_\_

Please rate the student on a scale of 1 (low) to 5 (high) on the following characteristics:

Character Traits	Rating
Respect for School Property, Tools and/or Equipment	
Commitment to Academic work	
Behavior and Attentiveness (ability and willingness to self-regulate)	
Honesty / Integrity / Work Ethic	
Ability to work at a college level (Reading / Applied Mathematics)	
<b>TOTAL</b>	

\_\_\_\_\_  
Instructor's Name (Please Print)

\_\_\_\_\_  
Instructor's Signature

*Comments:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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