



HFM BOCES Engineering Technology Program Student Enrollment Form

To be completed by the Student:

After completing the information below, forward this form to your High School Mathematics or Science teacher.

Student's Name: _____
Last Name
First Name
Middle Initial

Address: _____
Street Name and Number
City
Zip Code

Email: _____ Phone number: _____

High School: _____

To be completed by one (1) High School Mathematics or Science Teacher:

Please complete the following information and forward to the student's High School Guidance Counselor.

Teacher's Name and Subject: _____

Teacher's email address: _____

How long have you known the student? _____

(over)

To be completed by High School Mathematics or Science Teacher

Ratings: Please rate this student according to the following categories:

Categories	No basis for evaluation	Below average	Average	Above average	Excellent (Top 10%)
Academic Achievement					
Proficiency in subject matter					
Motivation					
Creativity					
Contributes to Class Discussion					
Peer relations					
Self confidence					
Maturity					
Leadership					
Integrity					
Reaction to setbacks					
Disciplined work habit					
Ability to work in teams					
Initiative					
Independence					

Additional Comments: In the space below (or on a separate attached sheet) you may include additional information about this student, including a description of academic and personal characteristics, affirming the student’s candidacy for the HFM BOCES Engineering Technology program.

Teacher’s Signature: _____ Date: _____

As School Counselor, I have reviewed and support this student’s candidacy for participation in the Engineering Technology program.

School Counselor’s Signature: _____ Date: _____