Park Square and SteppingStone Theatre Youth Ambassador Recommendation Form

For Youth Ambassador Applicants:
Please send this link to a teacher, director, or other adult mentor who would be able to speak to your strengths and experiences as an artist, maker, and leader.
The digital version of this form be found at: https://forms.gle/k94YLVydbhBYaTcb9

Instructions for Adult Mentors:
Thank you for taking time to support a young person's growth. Please complete the form below. This recommendation is for the use during the selection process for the Youth Ambassadors Program and will not be shared outside the evaluation committee. READ MORE ABOUT THE YOUTH AMBASSADOR PROGRAM HERE:

https://www.steppingstonetheatre.org/series/youth-ambassadors/
https://parksquaretheatre.org/education/theatre-ambassadors/

Please finish this recommendation form by May 30th, 2021. We appreciate your contribution.

* Required

1. Name of the Applicant/Young Person: *

2. Mentor's Name *

3. Mentor's Email *
4. Mentor's affiliated organization or institution *

5. Briefly describe your contact with this young person. Include any classes, extracurriculars, and/or theater arts experiences. *

6. How well does this young person work independently? *

Mark only one oval.

1  2  3  4  5

Below Average  □ □ □ □ □ Excellent

7. Comments? *
8. Please rate this young person's leadership ability. *

*Mark only one oval.*

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below Average</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9. Comments? *


10. Please rate this young person's artistic creativity and initiative. *

*Mark only one oval.*

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below Average</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. Comments? *


12. Please rate this young person's dependability / reliability. *

*Mark only one oval.*

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below Average</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Comments? *

14. Describe an example of extraordinary interest, ability, or achievement in theater or the arts for this young person. *
15. Additional Comments: Careful selection is crucial to this program. Please add any specific observations you have about this young person, particularly their unique qualifications as a potential Youth Ambassador at Park Square Theatre & SteppingStone Theatre for Youth. *

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

16. Overall Recommendation for this young person as a Youth Ambassador. *

Mark only one oval.

[ ] 1  [ ] 2  [ ] 3  [ ] 4  [ ] 5

Do Not Recommend  [ ]  [ ]  [ ]  [ ]  [ ]  Highly Recommend