

CSSSA Theater Application—2015

Recommender's Phone: (____) _____ - _____

Subject Taught: _____

How many years have you known this student and in what capacity:

Indicate below your evaluation of the applicant:

1. Interest in chosen area:

Below Average Average Above Average Superior

2. Ability in chosen area:

Below Average Average Above Average Superior

3. Character:

Below Average Average Above Average Superior

4. Cooperation:

Below Average Average Above Average Superior

5. Emotional Maturity:

Below Average Average Above Average Superior

6. Personal Initiative:

Below Average Average Above Average Superior

Please attach any additional comments.

Signature: _____ Date: _____

3. Return completed form to student (May be sealed for confidentiality) or mail directly to

CSSSA at:

California State Summer School for the Arts
ATTENTION: Letter of Recommendation
P.O. Box 1077
Sacramento, CA 95812-1077

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org