

# THE KAISER PERMANENTE HEALTH CARE CAREER SCHOLARSHIP PROGRAM

In partnership with the Oregon Health Career Center

## TEACHER NOMINATION FORM

**To the applicant:** This form must be completed by a teacher at your high school who knows you well and to whom you are not related. He or she should complete the form and return it directly to the Oregon Health Career Center. If it's submitted with your application, it will not be considered.

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 APPLICANT'S NAME HIGH SCHOOL

**To the reference:** The person named above is applying for a scholarship through The Kaiser Permanente Health Care Career Scholarship Program in partnership with the Oregon Health Career Center. His or her application will not be complete until we have received a nomination form completed by a teacher. Nomination forms must be submitted directly to the Oregon Health Career Center by the reference. Nomination forms may not be submitted by the student.

Please complete and mail this form to Oregon Health Career Center, Attn: Sara Diaz, 25195 SW Parkway Ave., Ste. 204, Wilsonville, OR 97070. You can also fax it to 503-682-1311, Attn: Sara Diaz.

**The application deadline is Friday, January 15, 2010.** Your input is greatly appreciated.

CHARACTERISTIC	1 LOW	2	3	4	5 HIGH	N/A NOT KNOWN	COMMENTS
Academic potential							
Commitment to health care career goal							
Communication skills							
Initiative and self-reliance							
Persistence							
Work ethic							
Leadership skills							

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What are the first words that come to mind to describe this applicant?

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Describe this applicant's strengths and limitations.

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Explain why you feel this applicant is ready for and will be successful in a college health care or dental health care program.

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Please include any other comments about the applicant you would like to share (attach another sheet as needed).

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I nominate this applicant with no reservations.

I nominate this applicant with reservations. (Please explain below.)

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REFERENCE'S NAME (PLEASE PRINT)

REFERENCE'S SIGNATURE

DATE

REFERENCE'S E-MAIL

REFERENCE'S PHONE

