

**Cankdeska Cikana Community College  
Student of the Month Nomination Form**

Student Name \_\_\_\_\_

Instructor \_\_\_\_\_

Month \_\_\_\_\_

Full or Part Time \_\_\_\_\_

Please rate the following questions.

Poor	Below Average	Average	Above Average	Excellent
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- |   |          |          |          |          |          |
|---|----------|----------|----------|----------|----------|
| 1. Has the student's attendance improved or been consistent?            | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| 2. Has the student shown steady improvement in their class?             | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| 3. Has the student shown an overall positive attitude?                  | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| 4. Has the student demonstrated outstanding abilities?                  | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| 5. Has the student made a positive difference in class?                 | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| 6. Why do you believe this student should be considered for this award? |          |          |          |          |          |

**Thank-you for taking time to nominate a student**