HALO

Helping And Loving Others 2020-2021

Name: Grade:
Note: You may use additional sheets to answer these questions:
1. Why do you want to be a peer helper?
2. What are some of your interests and activities?
3. What characteristics do you think a person should have to be a peer helper?
4. Write 5 words that you feel best describe your personality:
5. Would you be willing to use your lunch period to eat with a student you're assisting?
6. Why should you be selected to work with special needs students?
Applications are due to the CMS, DMS or CHS counseling office by March 20, 2020 . Students must request recommendations from 2 teachers in order to apply. (see attached forms)
Parent/Guardian signature:
Student signature:

CHS/CSHS H.A.L.O

2020 - 2021 Application

Teacher Recommendation

The following student has applied to be a member of the CHS/CSHS H.A.L.O class. (These students work with special needs students) Please return the completed form to the CMS, DMS or CHS Counseling offices by March 20, 2020. <u>Please do not return to the student.</u>

Student Name:		Grade (current):					
Please rate the following beha	aviors wit	h 1 being low a	and 5 being hi	gh.			
Work Completion	1	2	3	4	5		
Attendance	1	2	3	4	5		
Speaking in Front of Others	1	2	3	4	5		
Behavior	1	2	3	4	5		
Attitude	1	2	3	4	5		
Leadership	1	2	3	4	5		
Peer Relations	1	2	3	4	5		
Any additional comments:							
Please circle one:							
I do not recommend	Reco	ommend	Highly Recommend				
Teacher Campus/Signature:							

CHS/CSHS H.A.L.O

2019 - 2020 Application

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