

WWCC Cheer Squad Tryouts

Letter of Recommendation

Please Mail to:
WWCC Cheer Squad
Athletics Department
PO Box 428
Rock Springs WY 82902-0428

Applicant: _____

Email: _____

Phone #: _____

Please provide the respondent with a stamped, addressed envelope with this form.



Respondent: _____

Phone #: _____ Work: _____

Home: _____

This form will remain confidential. Please sign your name across the sealed envelope tab.



Please assess the applicant by checking the boxes in the chart.

How long have you known the applicant? _____

What is your relation to the applicant? _____

What are their strengths? _____

What are their weaknesses? _____

Please share your personal evaluation of this applicant:

	Excellent (Top 5%)	Above Average	Average	Below Average	Poor
Attitude					
Work Ethic					
Team Player					
Reliability					
Leadership					
Teachability					

(Please continue on back if necessary)

Thank you for taking the time to participate in the evaluation. If you would like to contact me, I can be reached through the Athletics Department at 307-382-1655 or email at cheer@wwcc.cc.wy.us.