



SAMPLE ONLY - USE ONLINE VERSION

2022-2023 Florida Sponsor Recommendation for the U.S. Senate Youth Program

Club or Organization Sponsor's Recommendation

The United States Senate Youth Program (USSYP) is a unique educational experience for outstanding high school students and an opportunity for motivated student leaders to have direct contact with the highest-level elected and appointed officials in the nation. The USSYP mission is to encourage the best and brightest students in America's high schools to pursue careers in public service. To learn more about USSYP visit: <https://ussenateyouth.org/>. For information on USSYP in Florida, visit: <https://www.fldoe.org/civcliteracy/ussyp.stml>.

This form is the club or organization sponsor recommendation for a student applying to the United States Senate Youth Scholarship program as the Florida delegate. The responses you provide will be used by the Florida Department of Education to score the eligible candidate.

IMPORTANT:

- The **deadline** for this online recommendation form to be submitted is **11:59 p.m. October 7, 2022**.

* 1. CLUB/ORGANIZATION SPONSOR RECOMMENDATION FOR

Student's First and Last Name

* 2. CLUB/ORGANIZATION INFORMATION

Name of the club/organization you head or sponsor.

* 3. Is the club/organization you head or sponsor...

- School-based
 Community-based

4. Keeping in mind that public service is the core mission of the United States Senate Youth program, briefly describe the service element of this club or organization.

*** 5. RECOMMENDING SPONSOR'S INFORMATION**

Name of Head or Sponsor Providing Recommendation (First and Last Name)

Email Address of the Club/Organization Head or Sponsor Providing this Recommendation

Phone Number of the Club/Organization Head or Sponsor Providing this Recommendation (Include Area Code)

*** 6. How long have you known the student applicant?**

- Less Than One Year One Year Two Years Three Years Four Years or more

*** 7. In what capacity do you know the student?**

*** 8. YOUR ASSESSMENT OF STUDENT APPLICANT**

Please provide an assessment of the student based on your knowledge of them, related to the categories indicated by checking one of the ratings for each characteristic listed for each row.

Merit

	Not Able to Rate	Below Average	Average	Above Average	Well Above Average
Academic Achievement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to Service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contributions to Class, School, or Community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 9. Character**

	Not Able to Rate	Below Average	Average	Above Average	Well Above Average
Respect for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Discipline	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 10. **Interpersonal & Communication Skills**

	Not Able to Rate	Below Average	Average	Above Average	Well Above Average
Ability to interact effectively with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to communicate effectively with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Open to multiple perspectives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respects diversity among groups and individuals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seeks to understand rather than make a judgement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 11. **WRITTEN RECOMMENDATION OF THE STUDENT**

Please provide the committee with your personal evaluation recommending this student applicant for the U.S. Senate Youth Program scholarship and opportunity. Include your thoughts based on your experiences with and knowledge of this student's abilities as a leader, achievements as a student, and commitment to service. We are particularly interested in information that will help highlight this student and differentiate them as being the "best" candidate to be awarded one of the two winning delegate scholarships.

Note: If you are not comfortable typing into the space below, type your recommendation separately **then copy and paste it into the space below.**

DO NOT MAIL OR EMAIL YOUR RECOMMENDATION. YOUR RECOMMENDATION MUST BE COMPLETED AND SUBMITTED USING THIS FORM.

12. **CLUB/ORGANIZATION SPONSOR AFFIRMATION**

I affirm that the student for whom this recommendation has been provided embodies the qualities and characteristics that align with the eligibility requirements of the United States Senate Youth Program.

- Yes
- No

13. **CLUB/ORGANIZATION SPONSOR CONFIRMATION**

I affirm that I am the club/organization head or sponsor identified in this recommendation and that I am the author of the content submitted.

Type full name as confirmation.