

PROFESSIONAL MUSIC TEACHERS OF NEW MEXICO
The Janet Spangenberg Weed Memorial Scholarship Fund

SCHOOL TEACHER EVALUATION

Mail completed application to: Heather Nasi, NCTM, PMTNM Scholarship Chair
1012 Yei Ave
Gallup, NM 87301

Student's Name _____

School Name _____ Grade _____

Teacher's Name _____

Address _____ City _____ Zip _____

Teacher's recommendation regarding the applicant's suitability for this scholarship: Please include the student's scholastic achievements, extracurricular activities and character strengths.

Signature _____ Date _____