



The Woodlands Arts Council
Student Art Scholarship 2020
Teacher Support Statement

Student's Name _____

High School _____

Teacher or Instructor's Name _____

Location if NOT the above High School _____

How long have you worked with this student _____

Areas of instruction with this student _____

Rate this Student's Artistic ability 1 2 3 4 5 6 7 8 9 10 off the chart

Rate this Student's Motivation and Work Ethic 1 2 3 4 5 6 7 8 9 10 off the chart

What impresses you most about this Student? Why would you give them a scholarship?

In submitting this Statement and Recommendation, I certify that I have personally supervised the above named Student, that I have no reason to believe the work they present is not their original work and that the Student has not received any unauthorized assistance with the creation of these works.

Signed _____ Date _____

Printed Name _____ Title _____

Please email this completed form to studentart@thewoodlandsartscouncil.org with the students name in the subject line.