



# Teacher Reference Form

## Best Buddies International

Thank you for taking the time to complete the Teacher Reference form. This student is applying to become a peer buddy in a Best Buddies chapter at your school. Best Buddies International pairs student volunteers in one-to-one friendships with their peers in special education. This student's participation in your school's Best Buddies chapter will help foster inclusion and continue to build an accepting, kind environment at your school. Your assistance in helping Best Buddies to identify students who are prepared to share their commitment and passion to this mission will develop stronger opportunities for success. Thank you!

<b>Name of student:</b>
<b>How do you know this student?</b>
<b>How long have you known this student?</b>
<b>Participation in Best Buddies calls for individuals who are highly motivated and have a strong sense of integrity and commitment. In your opinion, does this individual possess these qualities?</b> YES    NO
<b>Please explain:</b>
<hr/> <hr/> <hr/> <hr/>
<b>Do you have any reservations about recommending this student to be matched in a one-to-one friendship with a special education student?</b> YES    NO
<b>Please explain:</b>
<hr/> <hr/> <hr/> <hr/>
<b>For this candidate, please give one strength and one area that needs improvement:</b>
<b>Strength:</b> _____
<b>Improvement:</b> _____
<b>Print Name:</b> _____ <b>Position:</b> _____
<b>Signature:</b> _____ <b>Date:</b> _____