

Please return to:
Kansas Optometric Foundation
1266 SW Topeka Blvd.
Topeka, KS 66612

SCHOLARSHIP INTERVIEW (Educator's Form)

The following is to be completed by the interviewing educator and mailed personally by the educator.

Applicant's Name _____

(Please check appropriate box which best describes applicant.)

1. How does his/her appearance and manner affect others:
 - Tolerated by others
 - Unnoticed by others
 - Well liked by others
 - Sought by others

2. Does he/she need constant starting or does he/she go ahead with his/her work without being told:
 - Needs occasional encouraging
 - Does ordinary assignments of his/her own accord
 - Completes suggested supplementary work
 - Seeks and gets for himself/herself additional tasks

3. Does he/she control his/her emotions:
 - Tends to be overemotional or unresponsive
 - Usually well-balanced
 - Well balanced
 - Unusual balance of responsiveness and control

4. Does he/she successfully enlist the cooperation and attention of others:
 - Satisfied to have others take the lead
 - Sometimes leads in minor affairs
 - Sometimes leads in important affairs
 - Displays marked ability to lead his/her fellows

5. Has he/she a program with definite purposes, in terms of that which he/she distributes his/her time and energy to:
 - Aims just to "get by"
 - Has vaguely formed objectives
 - Directs energies effectively with fairly definite program goals
 - Engrossed in realizing well formulated objectives

6. How well do you know this student:
 - Not personally acquainted
 - Had a few casual meetings
 - Have had several conferences
 - Have a good knowledge of person

Additional comments:

Date _____ Signature _____
Educator's Title/Position _____