



**North Forsyth High School  
Directed Study-Office Aide  
Application Form 2022-2023**

Full Name: \_\_\_\_\_ Grade Level **Next** Year: \_\_\_\_\_

List all the Career/Tech courses you have completed: \_\_\_\_\_  
\_\_\_\_\_

Are you a Pathway Completer? \_\_\_\_\_ Which one? \_\_\_\_\_

Are you on track for graduation? \_\_\_\_\_ What is your overall GPA? \_\_\_\_\_

Are you fluent in a second language? Which one \_\_\_\_\_

**Directions-**

1. **Application**-This paper filled out and signed completely
2. **Transcript**-Attach an unofficial copy to this paper (print from your portal account).
3. **Recommendations** from **2** teachers -give these to your teacher of choice...they will return it to me
4. **Register** for your electives. You be will hand scheduled into the Directed Study (Office Aide) as one of your electives.
5. **Take me out**- Which elective? \_\_\_\_\_

I give my child permission to apply for the Directed Study (Office Aide) class.

**Student Signature:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Please return to Mrs. Mooney's room 886 before March 18<sup>th</sup>**



**North Forsyth High School  
Directed Study-Office Aide  
Teacher Recommendation 2022-2023**

Student Name: \_\_\_\_\_

Teacher Name: \_\_\_\_\_

Dear Teacher:

The student listed above is applying to be an office aide for next year. This student has selected you to complete a teacher recommendation for entry into the program. Please give honest feedback. Your responses will be kept confidential.

**Please check the appropriate response:**

Attendance:	_____ Excellent	_____ Good	_____ Acceptable	_____ Poor
Tardies:	_____ Excellent	_____ Good	_____ Acceptable	_____ Poor
Conduct:	_____ Excellent	_____ Good	_____ Acceptable	_____ Poor
Level of Responsibility:	_____ Excellent	_____ Good	_____ Acceptable	_____ Poor
Cooperative Attitude:	_____ Excellent	_____ Good	_____ Acceptable	_____ Poor

**Check One:**

\_\_\_\_\_ This student is an excellent candidate to be an office aide.

\_\_\_\_\_ This student would be a good candidate but needs improvement in the following area(s):

\_\_\_\_\_

\_\_\_\_\_

**Comments/Concerns:** \_\_\_\_\_

\_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please return to Mrs. Mooney before March 18<sup>th</sup>***