Due January 23, 2020

Advisor's Recommendation

This appraisal is part of the Ohio HOSA Officer Application. It can be **emailed** to ohiohosa.14@gmail.com with an **implied signature of approval** or it can be mailed separately from the application to the **Jim Scott, Ohio HOSA, 5943 Ocala Court, Galloway, Ohio 43119.**

CANDIDATE'S NAME *(First M. Last)*

Advisor's Appraisal

Description	***Please type an "X" in the appropriate box.***				
	Excellent	**Very Good**	**Good**	**Fair**	**Poor**
Applicant's demonstrated ability to lead others					
Applicant's overall character					
Applicant's demonstrated ability to be a team player					
Applicant's ability to follow the lead of others					
Reputation of applicant within chapter, school and community					
Applicant's reliability and timeliness					
Applicant's ability to follow through on a task					
Applicant's public speaking ability					
Applicant's academic acumen					

Why do you recommend the applicant to be an officer? (limited to the space provided below) ***Please include the applicant's greatest strength and an area of potential growth.***

Advisor's Signature (Please type name in the space if emailing this form to Jim Scott – Ohiohosa.14@gmail.com)	
The above information is a true, sincere and honest appraisal of the Ohio HOSA officer applicant.	
Chapter Advisor:	Date: