

San Jose High School
Cheerleading Team Tryout Packet
2017-2018

Cheerleading Team Expectations*

- Team members are expected to maintain grades with C's or better in all classes in order to participate in team activities
- Team members are expected to maintain appropriate appearance and behavior when engaging in activities in and outside of school
- Team members are expected to cooperate with other team members, coaches, and staff
- Team members are expected to make a full year commitment to practices, games, performances, and events

*If you make the cheerleading team, these requirements and more will be expected of you. If you decide this is something for you, DO IT!

Important Dates

| Parent Information Night | Tryout Workshop | Final Tryout |
|---|---|--|
| When: Wednesday, March 22 nd | When: Tuesday – Friday | When: Saturday, April 29 th |
| Time: 6:30pm | April 25 th – April 28 th | Time: 10:00am – 5:00pm |
| Where: San Jose High School | Time: 4:00pm – 5:00pm | Where: San Jose High School |
| ROOM 51 | Where: San Jose High School | CAFETERIA |
| 275 N. 24 th St. | CAFETERIA | 275 N. 24 th St. |
| San Jose, CA 95116 | 275 N. 24 th St. | San Jose, CA 95116 |
| | San Jose, CA 95116 | |

Tryout Check-List:

- Participant Waiver and Release Form
- Student Information and Questionnaire
- Teacher Evaluations from EACH enrolled class
 - Incoming 9th Graders, please have your current 8th grade teacher complete the evaluations
- NON-FAMILY ADULT Evaluation (i.e. former teacher, coach, mentor, or activities leader)
- Participate in the Tryout Workshop Days
- Participate in the Final Tryout

All forms are due to Coach Yuhara by Tuesday April 25th, 2017

You may turn in forms to the main office or Room 51 at San Jose High School
or email myuhara@sjsud.org

GOOD LUCK!



FAQ's

Q: Do I need prior cheerleading experience to try out?

A: *No, all skill levels are welcome.*

Q: What do I wear to tryouts?

A: *Please wear athletic shoes, running/sports shorts, and a t-shirt.*

If you have long hair, please wear it in a ponytail. DO NOT WEAR JEWELRY.

Q: I have a schedule conflict with the workshops and/or final tryout. Can I still tryout?

A: *Please communicate with the coaching staff to make the appropriate arrangements.*

You may still tryout BUT you will be held responsible to learn the try out material independently. Attendance to the tryout workshops will be considered in your final evaluation.

Q: Can I cheer and play another sport?

A: *No. Cheerleading is a yearlong commitment.*

Q: Can my friends come to tryouts?

A: *Tryouts will be held as a CLOSED AUDITION. No one other than the auditioning cheerleader, judges, staff, and assistants are allowed in the room while auditions are taking place.*

If you have any other questions, please e-mail Coach Yuhara at myuhara@sjusd.org



Waiver and Release Form

Name of Student: _____
School: San Jose High School
Dates/Times: April 25th – April 29th, 2017

Student ID#: _____
Activity: Cheerleading Tryouts
Faculty: Michelle Yuhara

I understand that there are risks and dangers inherent in participating in physical activities. I also understand that in order to be allowed to participate in this activity, I must give up my rights to hold the San Jose Unified School District, its Trustees, employees, and volunteers liable for any injury or damage which I may suffer while participating in this activity. Knowing this and in consideration of being permitted to participate in this activity, I hereby voluntarily release the San Jose Unified School District, its Trustees, employees, and volunteers from any and all liability resulting from or arising out of my participation in this activity.

I understand and agree that this Agreement will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present, or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation in this activity. This Release constitutes a complete release, discharge and waiver of any and all actions or causes of action against the San Jose Unified School District, its Trustees, employees, and volunteers.

I understand and agree that this Agreement applies to personal injury, property damage, or wrongful death, which I may suffer, even if caused by the negligent acts or omissions of others. I understand and agree that by signing this Agreement, I am assuming full responsibility for any and all risk of death or personal injury or property damage which I may suffer while participating in this activity. I understand and agree that by signing this Agreement, I am agreeing to release, indemnify, and hold the San Jose Unified School District, its Trustees, employees, and volunteers harmless from any and all liability or costs, including attorney's fees, associated with or arising from my participation in this activity.

I hereby release San Jose Unified School District, its officers, agents or employees, to arrange for my medical treatment, if necessary, at my expense. In the event I am unable to give instructions for medical care, full authorization is given to any licensed physician and/or surgeon to whom I am taken, to treat, administer drugs and medication, and perform surgical treatment, as he or she shall think the existing emergency requires, for the relief of pain and/or the preservation of life and/or health and well-being. I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required; instead it is given to provide the authority and power to the San Jose Unified School District to be in a position to make necessary arrangements for attempting to secure reasonable care under emergency circumstances. Any costs incurred in this connection not covered by my insurance shall be paid by me.

I understand and agree that this Agreement will be binding on me, my parents and siblings, spouse, my heirs, my personal representatives, my assigns, my children, and any guardian ad litem for said children. I understand and agree that if I am signing this Agreement on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf.

I acknowledge that I have read this Agreement and that I understand the words and language in it. I have been advised of the potential dangers incidental to participating in this activity.

Statement of Good Health: Participant, or their parent/guardian, represents that s/he is in good physical condition to engage in this activity. If said physical condition changes, participant will voluntarily withdraw from the activity.

Each participant is hereby advised to consult a physician prior to enrolling in a strenuous physical activity.

PARENT/GUARDIAN RELEASE:

I am the parent/legal guardian of the minor, _____ and I am signing this document on behalf of said minor.

Print Name of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____



Waiver and Release Form

Nombre del estudiante: _____
Escuela: San Jose High School
Fecha/Tiempo: April 25th – April 29th, 2017

Student ID#: _____
Actividad: Cheerleading Tryouts
Patrocinador Docente: Michelle Yuhara

Yo entiendo que existen riesgos y peligros inherentes a la participación en una actividad extracurricular fuera del Condado de Santa Clara debido al creciente potencial de violencia anti-estadounidense, incluyendo actos terroristas en contra de los ciudadanos de E.U.A., como resultado de la acción militar en Iraq. También entiendo que para que se me permita participar en esta actividad, yo reconozco explícitamente que el Distrito Escolar Unificado de San José, sus Representantes, empleados y voluntarios no son responsables de ninguna lesión o daño que pudiese yo sufrir mientras participo en esta actividad. Sabiendo esto y en consideración de que se me permita participar en esta actividad, por medio del presente Contrato, libero voluntariamente al Distrito Escolar Unificado de San José, sus Representantes, empleados y voluntarios de cualquiera y de toda responsabilidad que sea resultado o surja de mi participación en esta actividad.

Yo entiendo y estoy de acuerdo en que este Contrato tendrá el efecto de liberar, eximir, renunciar y para siempre ceder cualquiera y todas las acciones o causas de acción que yo pudiera tener o haya tenido, ya sea en el pasado, presente o futuro, ya sean conocidas o desconocidas, y ya sea que sean anticipadas o inanticipadas por mí, como resultado de mi participación en esta actividad. Esta liberación constituye una liberación completa que exime y cede cualquiera y todas las acciones o causas de acción en contra del Distrito Escolar Unificado de San José, sus Representantes, empleados y voluntarios.

Yo entiendo y estoy de acuerdo en que este Contrato es aplicable a la lesión personal, daño a la propiedad, o muerte por equivocación, que podría yo sufrir, aún cuando fuese causada por los actos negligentes u omisiones de otras personas. Yo entiendo y estoy de acuerdo en que al firmar este Contrato, estoy asumiendo completa responsabilidad de cualesquiera y todos los riesgos de muerte o lesión personal o daño a la propiedad que pudiese yo sufrir mientras participo en esta actividad. Yo entiendo y estoy de acuerdo en que al firmar este Contrato, estoy de acuerdo en liberar, indemnizar y considerar al Distrito Escolar Unificado de San José, sus Representantes, empleados y voluntarios totalmente libres de cualesquiera y todas las responsabilidades o costos, incluyendo costos de abogados, asociados con o que surjan de mi participación en esta actividad.

Por medio del presente Contrato doy mi autorización al Distrito Escolar Unificado de San José, sus oficiales, agentes o empleados, para que hagan los arreglos, si llegase a ser necesario, para mi tratamiento médico bajo mi propio costo. En caso de que yo esté incapacitado(a) para dar instrucciones para mi cuidado médico, se le da completa autorización al médico certificado y/o cirujano con quien me lleven, para que me trate, me administre drogas y medicamentos y realice el tratamiento quirúrgico, de acuerdo a lo que él o ella considere que requiere la emergencia existente, para el alivio del dolor y/o preservación de mi vida y/o salud y bienestar. Yo entiendo que esta autorización se da con anticipación de cualquier diagnóstico específico, tratamiento o cuidado hospitalario que se requiera; en su lugar es dado para proveer la autoridad y el poder al Distrito Escolar Unificado de San José de estar en una posición en la que pueda hacer los arreglos necesarios para intentar asegurar un cuidado razonable bajo circunstancias de emergencia. Cualesquiera costos en los que se incurra en esta conexión que no cubra mi seguro médico, serán pagados por mí.

Yo entiendo y estoy de acuerdo que este Contrato me comprometerá a mí, mis padres y hermanos, esposo(a), mis herederos, mis representantes personales, mis asignados, mis hijos y cualquier tutor para un litigio para dichos hijos. Yo entiendo y estoy de acuerdo en que si firmo este Contrato a nombre de mi hijo/hija menor de edad, estaré renunciando a los mismos derechos para dicho menor de edad como si lo hiciera al firmar este documento a mi propio nombre.

Yo reconozco que he leído este Contrato y el Aviso de No-Responsabilidad y que entiendo las palabras y el lenguaje en él. Yo he sido informado de los peligros potenciales incidentales a la participación en esta actividad. Yo reconozco explícitamente que mi estudiante o yo mismo(a) está/estamos participando en el evento voluntariamente, y que yo asumo todos los riesgos para mi hijo/hija, incluyendo cualesquiera daños que resulten de actos intencionales, negligentes, terroristas u otros actos u omisiones, incluyendo actos de guerra. Yo entiendo que este evento no es patrocinado por la escuela y por medio del presente Contrato asumo toda la responsabilidad por el cuidado de mi hijo/hija o de mí mismo(a) en la duración de este evento.

Declaración de buena salud: El/la participante, o su padre, madre o tutor declaran que él/ella se encuentra en buena condición física para participar en esta actividad. Si dicha condición física cambia, el/la participante se retirará de la actividad.

Se le aconseja, por el presente, a cada participante, que consulte a un médico antes de inscribirse a una actividad que requiere mucho esfuerzo físico.

LIBERACIÓN DEL PADRE, MADRE O TUTOR:

Yo soy la madre, el padre o el tutor/tutora legal del menor de edad _____ y estoy firmando este documento a nombre de dicho menor de edad.

Escriba el nombre de madre, padre o tutor con letra de molde: _____ Fecha: _____



Student Information and Questionnaire

| | |
|--|---|
| Student Name: | Student ID#: |
| Grade Level for 2017-2018: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Part-IB <input type="checkbox"/> Full - IB | I want to audition for: <input type="checkbox"/> Base <input type="checkbox"/> No Preference <input type="checkbox"/> Top <input type="checkbox"/> I don't know <input type="checkbox"/> Back Spot <input type="checkbox"/> I do not want to stunt <input type="checkbox"/> JV Team <input type="checkbox"/> Varsity Team |
| Student e-mail: | |
| Student Phone: <input type="checkbox"/> I can receive text messages | |
| Home Address: | Current GPA: |
| | Birthday: |

| | |
|---|---------------|
| Parent Name: | Relationship: |
| As a parent/guardian, I am willing to: <input type="checkbox"/> Transport my child to and from away games/events <input type="checkbox"/> Transport other team members to and from away games/events <input type="checkbox"/> Volunteer time/effort for team games/fundraising/events <input type="checkbox"/> Participate in SJHS Boosters Club <input type="checkbox"/> Other: | |
| Parent e-mail: | |
| Parent Phone: <input type="checkbox"/> I can receive text messages | |

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|--|
| Please describe in detail any allergies, health problems, or medications that coaches should be aware of. |
| What prior experience do you have in cheerleading? How many years? Where? If no experience, please provide information about activities you have participated in (i.e. sports, dance, drama). |
| Why do you want to be a San Jose High School Cheerleader? |





Cheerleading Teacher Evaluations - Period 1

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |





Cheerleading Teacher Evaluations - Period 2

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



Cheerleading Teacher Evaluations - Period 3

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
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Cheerleading Teacher Evaluations - Period 4

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
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Cheerleading Teacher Evaluations - Period 5

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



Cheerleading Teacher Evaluations - Period 6

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



Cheerleading Teacher Evaluations - Period 7

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org.

This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!

Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



Cheerleading Teacher Evaluations - Period 8

Colleagues,

Since cheerleading is a highly visible school activity, we strive to create a squad that will represent SJHS positively throughout the year. Teacher evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School. 8th Grade Teachers, please e-mail your evaluations to myuhara@sjusd.org. This is due BEFORE Tuesday April 25, 2017.

Thank you for your time!
Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|---------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluating Teacher: | | School: | | |
| Course: | | Course Grade: | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



Cheerleading NON-FAMILY ADULT Evaluation

(Example: Club advisor, previous coach, mentor, etc.)

To Whom It May Concern,

Cheerleading is a highly visible school activity. At San Jose High School, we strive to create a squad that will represent SJHS positively throughout the year. Evaluations are factored into their tryout scores and will influence the student's ability to make the squad. Please provide feedback with your honest opinion.

**Please return this form to Ms. Yuhara via the mailbox in Room 22 or Room 51 at San Jose High School
Or e-mail your evaluations to myuhara@sjusd.org.
This is due BEFORE Tuesday April 25, 2017.**

Thank you for your time!
Michelle Yuhara
Head Cheerleading Coach

| | | | | |
|---|------------------|-------------------------------|-------------|-------------|
| Student Name: | | Student ID#: | | |
| Evaluator: | | Activity: | | |
| Course (If Applicable): | | Course Grade (If Applicable): | | |
| | Excellent | Good | Fair | Poor |
| Attendance & punctuality to class | 4 | 3 | 2 | 1 |
| Punctuality with assignments | 4 | 3 | 2 | 1 |
| Ability to work well with others | 4 | 3 | 2 | 1 |
| Displays leadership qualities | 4 | 3 | 2 | 1 |
| Dependable and responsible | 4 | 3 | 2 | 1 |
| Attitude towards setbacks or constructive criticism | 4 | 3 | 2 | 1 |
| Please provide any additional comments regarding the auditioning student | | | | |
| | | | | |



