

BILL CONKLIN CONTINUING EDUCATION SCHOLARSHIP
PROFESSIONAL ATTITUDE APPRAISAL FORM

APPLICANT'S NAME: _____

Please select the category below which best describes the person requesting consideration for the Bill Conklin Continuing Education Scholarship appraisals will be held in strict confidence.

When completing the following appraisals, use the following scale:

- 1 – Student/Technologist seldom displays this attribute
- 2 – Student/Technologist usually displays this attribute
- 3 – Student/Technologist always displays this attribute

_____ Displays a cooperative attitude

_____ Demonstrates perseverance

_____ Takes responsibility for his/her own actions

_____ Is considerate of others

_____ Displays integrity

_____ Is flexible/adaptable

_____ Maintains a positive attitude

_____ Is inquisitive

_____ Is organized

_____ Displays leadership skills

Evaluator's Signature: _____ Date: _____

Relationship to the applicant: (Please check one.)

_____ Technologist _____ Instructor
_____ Program Director _____ Radiologist
_____ Community Leader

Please return this completed appraisal in a sealed envelope to the applicant. Mail to:

Christy Corley Nichols
260 Tommy Road
Batesburg, SC 29006
(Revised 2012 rem)