



Young Artist Grant Art Instructor/Artist/Teacher Recommendation

Applicant's Name: _____

Arts Discipline *(please check one)*

- Literary Arts
 Visual Arts
 Artisan Craft
 Music
 Media Arts
 Performing Arts

Recommender's Name: _____

Recommender's Signature: _____

You have been selected to complete this form based on your personal and professional understanding of the student's motivation, readiness for a new arts experience, creativity, and commitment to their art form.

Please complete both pages of this form, sign it, and upload it to the student's Young Artist Grant application by February 15, 2023 *(if they sent you an invitation via email to do so)* or deliver it to Region 2 Arts Council (R2AC) by Wednesday, March 1, 2023. You may scan or take a picture of this form and send it via email to staff@r2arts.org, or you may send it to our postal address:

Region 2 Arts Council,
 P.O. Box 693
 Bemidji, MN 56619.

The student or their parent/guardian can also deliver your recommendation to the R2AC office. To ensure confidentiality we ask you seal your recommendation in an envelope before giving it to the student to deliver.

Evaluation Form

In relation to similar-aged students who have shown an interest in the applicant's arts discipline, please rate the applicant in the following areas by checking the appropriate box in every line.

Artistic Evaluation

	Outstanding	Above Average	Average	Below Average	Not Acceptable
Artistic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal commitment to artistic pursuit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination/Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Artistic achievement/accomplishment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Readiness for new arts experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Evaluation

	Outstanding	Above Average	Average	Below Average	Not Acceptable
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in receiving and responding to feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments

Please comment on the following. You may write in the space below, or use a separate sheet if necessary.

1. How long and in what capacity have you known the applicant?
2. How would you characterize the student's commitment to his/her arts discipline? Please support your response with specific examples.
3. Please share your perspective on the student's creative expression.
4. Please comment on the student's ability to follow through with a task or project to its completion.
5. Please comment on the student's readiness to participate in a unique art experience.