



## Association of New York State Youth Courts

### Scholarship Survey

This survey is to be filled out by the Youth Court Director and submitted with the Scholarship Application.

Applicants Name: \_\_\_\_\_

Youth Court: \_\_\_\_\_

For each question, check the box if you agree or disagree with the statement when considering the member applying for the scholarship.

	YES	NO
The applicant demonstrates good attendance.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant puts forth above average effort.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant is willing to work in various court roles.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant shows above average leadership skills.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant is willing to help in the development or training of other members.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant serves as a positive example for his/her peers.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant displays good public speaking skills.	<input type="checkbox"/>	<input type="checkbox"/>
The applicant meets the overall criteria and standards for scholarship consideration.	<input type="checkbox"/>	<input type="checkbox"/>

Director's Signature: \_\_\_\_\_