Name of Student: ____________________________________________________________

I find this student’s math ability to be (please circle one):

   Truly Exceptional
   Outstanding
   Above Average
   Average

Comments:

Teacher Signature: ___________________________ Print Name: _______________________

Name of School: _____________________________ Phone Number: ____________________

Please return this form to:

UU Math Circle, Attn: Kathleen Kerr
University of Utah
Department of Mathematics
155 South 1400 East, Rm. 233
Salt Lake City, UT 84112-0090