

## Teacher Referral Form

Student  
Name:

\_\_\_\_\_

*Last*

\_\_\_\_\_

*First*

Teacher  
Name  
and  
contact  
info:

\_\_\_\_\_

*Last*

\_\_\_\_\_

*First*

\_\_\_\_\_

*Phone and email  
address*

School: \_\_\_\_\_

How long have you  
known the applicant?: \_\_\_\_\_

What courses has the applicant been a student of yours in?: \_\_\_\_\_

The Garmin Engineering Day Camp requires students to work in teams to build a product. What can you say about the applicant's ability to work in a team setting?

How would you describe the applicant's technical abilities and aspirations?

Our goal for the camp is to provide learning opportunities to students who haven't had as much exposure or resources to learn about STEM. With that goal in mind, do you feel this camp would be a good fit for the student?

Do you have any reservations for this candidate being selected for the Garmin Engineering Day Camp program?

Thank you! Once you have completed, please email this form to [stemoutreach@garmin.com](mailto:stemoutreach@garmin.com).