



Recommendation Form

Student: please fill in the following information for your reference.

Full Name: _____ Date: _____
First Last

Phone: _____ Email: _____

Student ID#: _____ EUID: _____

Applicant Qualifications

Please rate the applicant in the following areas on a scale of 1-5 Likert scale, with 1 being Not so Good and 5 being Great.

| Competency | 1 | 2 | 3 | 5 | 5 |
|--|---|---|---|---|---|
| Personal Responsibility: This student seems to have a clear self-image and is responsible for the choices they make. | | | | | |
| Critical Thinking: This student is able to effectively analyze situations, using reason when presented with difficult tasks. | | | | | |
| Teamwork: This student actively sees opportunities to learn from others and achieve a shared vision of a team. | | | | | |
| Communication: This student effectively expresses their thoughts, ideas, and feelings to others. | | | | | |
| Social Responsibility: This student takes time to help others and tries to understand the emotions of others. | | | | | |

Is there anything else you would like to share about this applicant?: _____

Printed Name of Reference: _____

Signature: _____ Date: _____

Please return form to the student to turn in with their application.