



Recommendation Form

Student Name

College

1. Using the chart below, please rate the applicant relative to others you have known in a similar capacity:

	Poor	Fair	Good	Excellent	Not Observed
Academic Performance					
Leadership Potential					
Self-Directedness					
Assertiveness					
Emotional Stability					
Oral Communication Skills					
Written Communication Skills					
Ability to Accept & Utilize Constructive Criticism					
Ability to Meet Deadlines					
Social Awareness & Concern					
Motivation for Proposed Program of Study					
Potential for Adjustment to Urban Environment					
Potential for Positive Supervisor-Student Relationships					

2. How long and in what capacity have you known the applicant?

3. What do you consider to be the applicant's most outstanding talents or characteristics? How have they been displayed?

4. In what areas does the applicant need to further develop or show improvement?

5. Please comment on the applicant's skills and adaptability for a work setting. Which abilities most highly commend him/her for an internship? How strongly do you recommend him/her for the 32 hour/ week placement?

Name

Title

Organization/College and Department

Phone Number

E-mail

Signature

Date