School of Education
Recommendation Form

The following named student is applying for acceptance into the School of Education at Southern Connecticut State University. This requires the applicant to submit two (2) letters of recommendation along with this completed rating form from professionals able to testify to the individual's suitability as a prospective candidate.

Please complete this rating form and attach it to your letter of recommendation, which should more fully elaborate upon your ratings of this applicant and any other relevant matters.

Mail your letter and form to:
Dr. Marty Hartog
Math Department, Engleman D127
Southern Connecticut State University
501 Crescent Street
New Haven, CT 06515

Applicant Name:_____   Certification Area: _____Math_____

I hereby waive my right of access under the Family Education Rights and Privacy Act of 1974 to specific and composite letters of recommendation:

Applicant's Signature: _____   Date: _____

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

Please rate the above named applicant relative to other students/employees whom you have known in a similar capacity:

	Excellent	Good	Poor	No Information
Intellectual Curiosity				
If unable to report, calls supervisor promptly				
Works and relates well to others				
Performs assignments effectively				
Ability to analyze a problem and formulate a solution				
Asks questions when in doubt				
Approaches assignment with seriousness				
Exhibits interest and enthusiasm				
Accepts supervision in positive fashion				
Learns from every experience				

Math Undergraduate

	Excellent	Good	Poor	No Information
Expresses opinions and disagreements in a mature manner				
Is flexible with changes				
Seeks opportunities to improve				
Demonstrates sensitivity to diversity of individuals				
Maintains confidentiality when required				
Accepts responsibility with commitment				
Demonstrates attitudes and dispositions relevant to pursuit of teaching				
Communicates effectively: oral				
Communicates effectively: written				

Additional Comments:

_____   _____
Recommender's Signature   Print Name

_____
Recommender's Address   City   State/Zip Code

_____
Phone   Title/Position