

## Elementary/Special Education Collaborative Recommendation Form

The individual identified below is applying for acceptance into the School of Education at Southern Connecticut State University. This requires letters of recommendation from professionals able to testify to the individual's suitability for admission to a teacher preparation program. Letters of recommendation need to be accompanied by this completed rating form.

**Please complete this rating form and include it with 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:  
 Department of Curriculum & Learning  
 Davis Hall, Rm. 116  
 Southern Connecticut State University  
 501 Crescent Street  
 New Haven, CT 06515

Applicant Name: \_\_\_\_\_ Certification Area: \_\_\_\_\_

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 individuals 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				

	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