GEAR UP RECOMMENDATION FORM

Applicant's Name					
To the Recommender: The person above had applied for a tuto reference. We know the effort that can go into filling out a rec Please feel free to use a casual style in your responses if that m	ommendatio	on form,	and we app	preciate you	
Recommender's name					
Address					
City State	Zip Code				
Telephone ()					
Position How many years have yo	u known the	e applica	nt?		
How do you know the applicant?					
What days and times are best for us to discuss this applicant?_					
Please rate your responses to the following statements:					
In my experience, this applicant:					
	strongly agree	agree	neutral	disagree	strongly disagree
is reliable and conscientious in his/her approach to a task.	1	2	3	4	5
can work well under stress.	1	2	3	4	5
responds well to direction & instruction from supervisors.	1	2	3	4	5
is thorough in his/her approach to a project.	1	2	3	4	5
can work independently once the desired outcome is known.	1	2	3	4	5
is detail-oriented.	1	2	3	4	5
likes to take the role of the leader.	1	2	3	4	5
is flexible in adjusting to work schedules and assignments.	1	2	3	4	5

Please briefly describe your view of the applicant with regard to his/her ability to work effectively and creatively with others towards a common goal.

What do you feel the applicant does best in a work setting?

Please discuss any other characteristics or attributes of the applicant you think we should bear in mind while considering the possibility of entrusting a group of children to the care and supervision of this person.

Signature of Recommender

Please return to:

Hunter Huckabay, Director of GEAR-UP • College of Health Education and Professional Studies • Department 4405 University of Tennessee at Chattanooga • 540 McCallie Avenue • Chattanooga, TN 37403-2598 (423) 425-5386 • Fax (423) 425-2272 • e-mail <u>Hunter-Huckabay@utc.edu</u>