GEAR UP RECOMMENDATION FORM

Applicant's Name						
To the Recommender: The person above reference. We know the effort that can go Please feel free to use a casual style in your property of the control of the recommender.	o into filling out a red	commendat	ion form	, and we a	ppreciate yo	
Recommender's name						
Address						
City	State		Zip Code			
Telephone ()						
Position Hov	v many years have yo	ou known th	e applica	ant?		
How do you know the applicant?						
What days and times are best for us to dis	scuss this applicant?_					
Please rate your responses to the following	ng statements:					
In my experience, this applicant:		strongly				strongly
		agree			disagree	disagree
is reliable and conscientious in his/her ap	proach to a task.	1			4	5
can work well under stress.		1 1	2	3	4 4	5 5
responds well to direction & instruction f		1	2	3	4	5
is thorough in his/her approach to a proje can work independently once the desired		1	2 2	3	4	<i>5</i>
is detail-oriented.	outcome is known.	1	2	3	4	5
			2	3	4	
likes to take the role of the leader. is flexible in adjusting to work schedules	and assignments.	1 1	2	3	4	5 5
Please briefly describe your view of the a others towards a common goal.	pplicant with regard	to his/her a	bility to	work effec	tively and c	creatively with
What do you feel the applicant does best	in a work setting?					
Please discuss any other characteristics of the possibility of entrusting a group of ch					ar in mind v	vhile considering
Signature of Recommender			Date			
Please return to: Hunter Huckabay Director of GEAR-UP	• College of Health	Education	and Prof	essional S	tudies • De	nartment 4405

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