

REFERENCE FORM

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Name of candidate:						-				
Name of Person Completing Reference:				Phone Number:						
Address of Reference:										
	то	BE SIGNED BY THE A	APPLI	CANT/CA	NDIDA	TE BELO	W:			
I waive my rights to inspe				pect this recommendation form.						
I do not waive my rights to inspect this recommendation form.										
				·						
I consent to the	e LSSU C	Office of campus Life	to cor	tact the	above li	sted refe	rence:	Yes _	No	
	Candidate Signature							_		
	Carraidate Cignatare									
Please answer the questions to Relationship to the candida How long have you known to the candida to the candid	te? the candi	idate?								
Please rate the candidate in	i the area	as listed below using	ine i	ollowing	scale:					7
0-Not observed 1-Unsatis	factory	2-Below Average	3-	Average	4-A	bove Aver	age	5-Outstan	ding	
Personality Traits						Rat	ing			_
Personality (poise, openness)				0	1	2	3	4	5	
Maturity (judgment, open mindedness)			0	1	2	3	4	5		
lotivation (able to take on challenges)				0	1	2	3	4	5	1
Emotional stability (disposition, personal adjustment)				0	1	2	3	4	5	1
Ability to handle stress				0	1	2	3	4	5	1
Acceptance of cultural and orientation differences				0	1	2	3	4	5]
Social Skills						Da	ting			
Feam Skills (ability to cooperate, positive attitude, flexible)				0	1	2	3	4	5	-

Rating **Administrative Ability** Timeliness Time management (ability to meet deadlines) Task management (planning, organizing, implementing) Follow through (attention to completing details)

Communication (self-expression, listening skills)

Assertiveness (tact, diplomacy, able to deal with conflict)

(over)



Please provide any comments regarding the information you presented on the Rating Scale above in the areas of Personality, Social Skills, and Administrative Ability.
Do you think this person would be successful as a Resident Advisor or Resident Success Coach? Please state why or why not. Please include specific examples such as campus involvement, class interactions, etc.
Please discuss this candidate's potential for success in an employed leadership position. You may also discuss the applicant's strengths and weaknesses. Please include any other information you feel would be nelpful for the Selection Committee to know. You may submit this information on a separate sheet of paper, if necessary.
This candidate should be (please check one):
Highly Recommend, no reservations
Recommend
Recommend, with some reservations
Do not recommend
Reference Signature Date

Return completed reference to:

Lake Superior State University
Office of Campus Life
125 Cisler Student and Conference Center
650 W. Easterday Avenue
Sault Sainte Marie, MI 49783
Phone: (906) 635-2411Fax: (906) 635-2083