

Recommendation Form

PRINT THIS FORM AND MAKE SURE THAT YOU SUBMIT 2 RECOMMENDATIONS

Name _____

I hereby waive my rights to see these recommendations.

Student Signature _____

Date _____

To the individual completing this form:

Part of the application includes two recommendations from either a faculty member or employer. The U.S. Department of Education would appreciate a candid reference on the above named candidate. Thank you for taking the time to fill out this form.

How long have you known this candidate?

What capacity have you known the individual?

Please list five adjectives that best describe the candidate:

In your opinion, how will the candidate adapt to a professional setting?

Please rate the candidate in the following areas. [On a scale of 1 (poor) to 5 (outstanding)]

Maturity	1	2	3	4	5
Respect for Others	1	2	3	4	5
Honesty	1	2	3	4	5
Tactfulness	1	2	3	4	5
Discretion	1	2	3	4	5
Work Habits	1	2	3	4	5
General Appearance	1	2	3	4	5
Organizational Skills	1	2	3	4	5
Emotional Stability	1	2	3	4	5
Motivation	1	2	3	4	5
Flexibility	1	2	3	4	5

Would you recommend the candidate:

with some reservation _____ without reservation _____ enthusiastically _____

Additional Comments

Please add a few comments as to why you believe this applicant would or would not make a successful intern.

Name _____

Title _____

Address _____

Daytime Telephone Number () _____

Signature _____

Date _____

Thank you for taking the time to complete this form. Please send the completed form to:

U.S. Department of Education
400 Maryland, Avenue, S.W. (FB-6, Room 7E230)
Washington, DC 20202