# Attachment F

## STUDENT INTERN REFERENCE(S) RECOMMENDATION FORM (Part 1)

Student Intern's Name: \_\_\_\_\_

I, hereby, waive my rights to see recommendations received from my references.

Student Signature

Date

#### To the individual completing this form:

Part of the application process for the college student interns includes three recommendations, one from a faculty member and two from employers and/or personal references (non-related). The U.S. Postal Service Office of Inspector General would appreciate a candid reference on the above-named student.

1. How long have you known this student?

• •	
0 - 1 year	
2 - 5 years	
6 - 10 years	
10 or more year	ars

2. In what capacity have you known the student?

Instructor
Employer
Other

3. Please list five adjectives that best describe the candidate:

A. \_\_\_\_\_

В. \_\_\_\_\_

- C. \_\_\_\_\_ D.
- E.

1) How well would the student adapt to a professional setting?

2) Why do you believe this student would or would not make a successful intern?

### **STUDENT INTERN RECOMMENDATION FOR REFERENCES (Part 2)**

#### Please rate the candidate in the following areas on a scale of 5 (outstanding) to 1 (poor).

	Outstanding			Poor	
Maturity	5	4	3	2	1
Respect for others	5	4	3	2	1
Discretion	5	4	3	2	1
Work Habits	5	4	3	2	1
Ability to achieve goals	5	4	3	2	1
Organizational Skills	5	4	3	2	1
Analytical Thinking	5	4	3	2	1
Flexibility	5	4	3	2	1

Please comment on any low ratings:

Which one of the following best describes your recommendation for this student?

<sup>1</sup> Highest recommendation

- <sup>1</sup> Recommend, without reservations
- <sup>1</sup> Recommend, with reservations
- 1 Do not recommend

Signature of Interviewer	Date
Title:	
Address:	
Daytime Telephone Number:	
-	

Thank you for completing this form. Please send the completed form to: (Insert your return address here)