



CONFIDENTIAL REFERENCE FORM

Name of Candidate: _____

Date Submitted: _____

Position candidate is applying for: _____

Name of Evaluator: _____

Professional Relationship to Candidate: _____

Please complete

Please rate the candidate in the following areas according to your experience as an administrator:

	Outstanding	Above Average	Average	Below Average	Weak
Demonstrates knowledge of content and pedagogy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engages all learners by using a variety of strategies and techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creates an environment of respect and rapport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manages classroom procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates flexibility and responsiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively communicates goals and expectations for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingly participates in student-centered extra-curricular activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adapts well to a different teaching environment and culture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflects on teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintains accurate records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles problems with tact and skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. What is the candidate's greatest strength?

2. In what areas would you like to see the candidate improve?

3. How would you rank this candidate in overall performance?	TOP 2%	TOP 10%	TOP 25%	TOP 50%	LOWER 50%

4. Are you completely satisfied that the candidate is suitable to work with children?
If, not please give specific reasons for your concerns.

5. Would you be willing to re-employ the candidate?
If your answer is "No", please explain why.

6. Anything else you would like to add?

Evaluator's Signature: _____

Evaluator's E-mail: _____

Evaluator's Telephone: _____