Master of Arts in Teaching - Elementary Education

PITTSBURG STATE UNIVERSITY COLLEGE OF EDUCATION GRADUATE STUDY RECOMMENDATION FORM

Applicant's Name					PSU ID #	<u></u>	
Last	F	irst	M	liddle			
Recommender's Name						_	
	Last	First		Mide	dle		
To the applicant: Complete Please choose whether or not will not be considered unless	t you wish to waive y	our right of acc	ess to this	ne person recomme	serving a	s a reference. Your application	
I waive my rights to	see this form and any	supplementary	comment	s or letter	, if writte	n.	
I do <u>not</u> waive my rig	ghts to see this form a	and any supplen	nentary co	mments o	r letter, if	written.	
Signature		Date					
The person named above is a Pittsburg State University. Pl cooperation.							
1. a. How long have you	known the applicant	? Le	ss than on	e year	Y	<i>Y</i> ears	
b. How do you know t	the applicant?						
Please rate the applicant	on the traits shown b	below using the	following	rating sca	le:		
2 - Car 3 - Car	ndidate is above averandidate consistently dedidate inconsistently addidate does not display	lisplays the disp displays the di	osition.	osition.		Not Able to Judge	
Academic Ability for Gradu	ate Work	1	2	3	4		
Communication Skills		1	2	3	4		
Success in Forming Profession	onal Relationships	1	2	3	4		
Motivation and Diligence		1	2	3	4		
Openness to Self-Examinati Personal and Professional De		1	2	3	4		
Potential as a Practitioner		1	2	3	4		

5. If you alone were making the decision for admission, which of the following	ing would it be?					
Accept - The applicant should complete the master's degree and be Accept, but with reservation - Please explain including comments	•					
motivation, or personal characteristics to be successful as a student and/or practitioner.						
Do not accept - Please explain.						
4. Please provide a few comments giving your evaluation of the applicant's s reference to initiative, intelligence, and ability to complete tasks on time. A st emotional stability, maturity, and ability to collaborate with colleagues and su important for individuals applying to our practitioner programs.	atement about the applicant's					
Name (Print or Type)						
Title/Position						
Signature						
Address						
Telephone						

Please complete and return this form promptly via email to: teachered@pittstate.edu