



PLEASE RETURN THIS FORM DIRECTLY TO:

**COLORADO MESA UNIVERSITY
CENTER FOR TEACHER EDUCATION**

1100 North Ave. • Grand Junction, CO 81501

Phone (970) 248-1618 • gradprograms@coloradomesa.edu

Form B – Supervisor: Recommendation for Master of Arts in Education Program

APPLICANT'S NAME _____

DATE: _____

- The person named above is an applicant to the Master's Program in Education at Colorado Mesa University.
- Please **provide specific examples** that evaluate the applicant's capacity **for leadership at the district level &/or building level**.
- **Rate each category on a scale from 1 to 5**, with 5 being the highest rating. *As you fill out this form, please consider the leadership potential of the candidate in your school or district.*

PROFESSIONALISM: NUMERIC RATING _____ (select a rating)

(open to feedback, collaborative skills, confidentiality, professional appearance/demeanor, timeliness)

MOTIVATION, DRIVE, AND INITIATIVE: NUMERIC RATING _____ (select a rating)

WORK ETHIC: NUMERIC RATING _____ (select a rating)

(shows initiative, flexibility, reliability, has good judgment, and completes tasks)

ABILITY IN WRITTEN AND ORAL COMMUNICATION: NUMERIC RATING _____ (select a rating)

LEADERSHIP POTENTIAL: NUMERIC RATING _____ (select a rating)

EFFECTIVE COMMUNICATION WITH YOUTH: NUMERIC RATING _____ (select a rating)

CRITICAL THINKING/PROBLEM SOLVING: NUMERIC RATING _____ (select a rating)

CREATES A POSITIVE ENVIRONMENT: NUMERIC RATING _____ (select a rating)

RAPPORT WITH PARENTS/GUARDIANS AND COLLEAGUES: NUMERIC RATING _____

ACADEMIC ABILITY, SCHOLARSHIP, LIFELONG LEARNER QUALITIES: NUMERIC RATING _____

FUTURE CONTRIBUTION TO THE FIELD OF EDUCATION: NUMERIC RATING _____ (select a rating)

RECOMMENDER'S NAME: (printed)

OVERALL RECOMMENDATION:

_____ RECOMMEND HIGHLY

TITLE/POSITION:

_____ RECOMMEND

_____ RECOMMEND WITH RESERVATIONS

PHONE# _____

_____ DO NOT RECOMMEND

INSTITUTION/ORGANIZATION:

SIGNATURE:

TODAY'S DATE: _____
