



## Educational Leadership C.A.S. Reference Form

**To the applicant:** Completed references must come from supervisors or practicing educational leaders who know your work and can assess your accomplishments and leadership potential. Complete the top portion of this form, and then forward it to your recommender.

Applicant Name (Last, first) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Name & Title (position) of Recommender \_\_\_\_\_

The Family Education Privacy Act of 1974 and its amendments guarantee students access to educational records concerning them. Students are permitted to waive their right of access to recommendations. The following statement indicates the wish of the applicant regarding this information. I  waive  do not waive my right to inspect the contents of this recommendation.

Applicant's signature \_\_\_\_\_

**To the recommender:** Assess the applicant in terms of the NYS standards listed below. Please rate the applicant in comparison to others you have or would encourage to pursue educational leadership and administration.

	Top 3%	Next 10%	Next 20%	Middle Third	Lowest Third	Unable to judge
Intellectual ability						
Written communication skills						
Oral communication						
Initiative						
Collaboration with others						
Problem solving abilities						
Vision for schools						
Willingness to take informed risks						
Perseverance						
Commitment to lifelong learning						

Would you advocate for the creation of an Internship in your school/district for this applicant? Yes No Don't know

Overall Rating:  Strongly recommend  Recommend  Recommend with reservation  Do not recommend

How long have you known the applicant, & in what capacity? \_\_\_\_\_

Recommender Signature \_\_\_\_\_ Date \_\_\_\_\_  
 School and/or District \_\_\_\_\_ Phone \_\_\_\_\_

Please add any other information you feel we should know about the applicant, on the reverse. Upon completion, please enclose in a sealed envelope with your signature across the seal, and return to the applicant. Thank you.