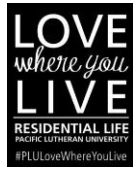




**Professional Recommendation Form**  
**Residence Hall Association Director Position**  
**Department of Residential Life**



**Name of Applicant:** \_\_\_\_\_

**Application Year:** 2017 – 2018

**To the recommender:** *The individual named above has applied to serve on the Residence Hall Association (RHA) Executive Board. We would appreciate your assessment of this individual's ability and motivation, time management, maturity, and their potential for successfully creating a sense of belonging in our residential communities. Your assessment will be reviewed by the RHA Hiring Committee and is an important part of our hiring process. Should you desire to discuss this individual's candidacy with the selection committee please indicate with an X below and sign, date and submit this form.*

How long and in what capacity have you known the applicant?

\_\_\_\_\_

\_\_\_\_\_

	Excellent	Good	Average	Below Average	Unknown
<b>Academic and Learning Ability</b>					
Ability to balance classes and outside	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student is serious about academics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocates for personal learning and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has desire to learn and grow personally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Leadership Development</b>					
Self-efficacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in building community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to interact well interpersonally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Safety and Inclusivity</b>					
Carries work to completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Uses good judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to stress and crisis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works well without supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes direction well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Belonging</b>					
Sensitivity to Diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caring, friendly, and kind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adjusts well to new situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments on any of the above sections or any additional information that would be useful or important to know about the applicant:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How would you rate this applicant on combined measure of performance and personal promise?

\_\_\_\_\_ Top 10%

\_\_\_\_\_ Upper 25%

\_\_\_\_\_ Upper 50%

\_\_\_\_\_ Lower 50%

Overall Recommendation: \_\_\_\_\_ Recommend

\_\_\_\_\_ Recommend with Reservation

\_\_\_\_\_ Do Not Recommend

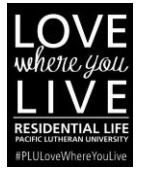
Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Professional Recommendation Form  
Residence Hall Association Director Position  
Department of Residential Life**



Position/Title: \_\_\_\_\_

Organization: \_\_\_\_\_

☐ Check here if you would like to be contacted regarding this recommendation

**\*\*\*Please send or drop this form off to the RHA office, AUC 143.\*\*\***