

**Applicant's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The above named applicant for teaching has selected you as a source of reference. We would appreciate your comments as to the applicant's qualifications.

**Note: When this reference is received in the Teacher Preparation and Certification Program office, it is held strictly confidential and not revealed to the above named applicant.**

Check appropriate column for each item below	Superior	Above Average	Average	Fair	Poor	Do Not Know
Ability to present ideas						
Work habits						
Professional attitude						
Rapport with peers						
Resourcefulness						
Reliability						
Cooperativeness Interpersonal skills / Cooperation						
Professional appearance						
Initiative						
Enthusiasm						
Openness to suggestion						
Attention to detail						

1. Was the applicant employed in your company/school? Yes \_\_\_ No \_\_\_
2. If so, was the applicant asked (directly or indirectly) to leave your company/school? Yes \_\_\_ No \_\_\_
3. Will this person require more than average supervision? Yes \_\_\_ No \_\_\_
4. Would you employ (or re-employ) this person? Yes \_\_\_ No \_\_\_
5. Would you want this person to teach your children? Yes \_\_\_ No \_\_\_
6. What is your relationship to the applicant? \_\_\_\_\_

Make any additional comments you feel would be helpful to the committee reviewing this applicant.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relationship to Applicant (i.e. employer, supervisor, co-worker, etc.): \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Company/School: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Please return this form to:**

**Region 10 Education Service Center TPC Program  
400 E. Spring Valley Rd.  
Richardson, TX 75081  
Fax: (972) 348-1493**