

PROFESSIONAL REFERENCE (Teacher Applicant)

NAME OF APPLICANT _____ DATE _____

The above-named applicant has applied for a teaching position in the Catholic Schools in the Diocese of Evansville, and has listed your name as a reference. Please complete this form and send to: Catholic Schools Office, Teacher Placement, PO Box 4169, Evansville IN 47724-0169. Your honest and candid response will be appreciated and treated confidentially.

O=Outstanding AA=Above Average A=Average BA=Below Average U=Unsatisfactory

| PERSONAL QUALITIES | O | AA | A | BA | U |
|-------------------------------|----------|-----------|----------|-----------|----------|
| Physical Appearance | | | | | |
| Physical Health | | | | | |
| Intelligence | | | | | |
| Mental Health | | | | | |
| Enthusiasm for Teaching | | | | | |
| Initiative | | | | | |
| General Moral Character | | | | | |
| Patience | | | | | |
| Tact | | | | | |
| Courtesy | | | | | |
| Dependability and Punctuality | | | | | |

(applicable to principals, supervisors, critic teachers)

| PROFESSIONAL QUALITIES | O | AA | A | BA | U |
|---------------------------------------|----------|-----------|----------|-----------|----------|
| Dedication/Commitment | | | | | |
| Professional Background | | | | | |
| Presentation of Material | | | | | |
| Ability to Discipline | | | | | |
| Attitude of Pupils toward Applicant | | | | | |
| Attitude of Teachers toward Applicant | | | | | |
| Attitude of Parents toward Applicant | | | | | |

- In what capacity have you known the applicant? _____
- How long have you known the applicant? _____
- Have you observed the applicant teaching? ___Yes ___No
- What are the applicant's strengths? Weaknesses? _____

- Would you be willing to re-employ the applicant? ___Yes ___No

Signature _____ Date _____

Printed Name _____ Position _____

School/Firm _____ Telephone () _____

WAIVER: *In accordance with the Family Rights and Privacy Act of 1974-75, I hereby voluntarily waive my right of access to all recommendations and/or reference information which I have authorized the Catholic Schools Office and interested schools of the Diocese of Evansville to obtain pursuant to my application of employment.*

Applicant Signature _____ Date _____