

Learning Community Coordinator Applicant Reference Form
Minnesota State University, Mankato
Office of First Year Experience

_____ is applying for a position as a Learning Community Coordinator in the Office of First Year Experience. S/he will be responsible for supporting students in their academic, social and personal growth at the University, communicating with faculty and staff, planning events for groups of 25 up to 300, and working as a team member on a staff of undergraduate students.

We would greatly appreciate your frank evaluation of this applicant. Please complete this form at your earliest convenience and return to the applicant or to the Office of First Year Experience;
 Minnesota State University, Mankato; 10 Gage Center; Mankato, MN; 56001

How well do you know this applicant? Very well _____ Rather well _____ Casually _____ Barely _____

Relationship to Applicant _____

Please circle the phrase that best describes the applicant's behavior. If unknown, please write N/A. Your comments are also of the utmost importance.

APPEARANCE:	flawless	well-groomed	generally neat	slovenly
ACADEMICS:	weak	satisfactory	strong	outstanding
DEPENDABILITY:	exceptional	usually dependable	requires supervision	irresponsible
INITIATIVE:	resourceful/self motivated	industrious	has necessary drive	indifferent
PERSONALITY:	bland	pleasing	outgoing	magnetic
COOPERATION:	inspires confidence	cooperates willingly	usually cooperative	obstructionist
LEADERSHIP:	inspirational	able to take charge	good team member	incapable of leading
ATTITUDE:	enthusiastic	positive	generally acceptable	negative
COMMON SENSE:	lacking	needs experience	average	uses sound judgment
ORAL EXPRESSION:	eloquent	fluent	satisfactory	limited
INTEGRITY:	trust-worthy	generally reliable	sometimes lacking	can't be trusted
OPENNESS:	oppositional	tolerant	accepting	embracing

What, in your estimation, is this person's greatest ability? _____

What, in your estimation, can this person improve upon? _____

Recommendation: _____ highly recommend _____ recommend _____ do not recommend

Signed _____ Name _____

Date _____ Daytime Phone _____

Please add any additional comments you wish to share on the reverse side.