

Please distribute these forms to your references.  
Please include a stamped envelope addressed to:

The Graduate School  
University of North Florida  
1 UNF Drive  
Honors Hall, Room 1351  
Jacksonville, FL 32224

Please check and sign one of the following:

I give permission for this information  
to remain confidential and not made  
available to me.

I reserve the right to view this information.

\_\_\_\_\_  
Applicant's Signature

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**UNIVERSITY OF NORTH FLORIDA**

Reference Form for Applicant to the  
Educational Leadership Program

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

N # \_\_\_\_\_ (available upon application to the University)

Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Name of Reference: \_\_\_\_\_ Title: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

**NOTE TO REFERENCE:** Please give thoughtful evaluation of the above applicant. Use the blank spaces to indicate strong and/or weak difficulties in the applicant. The information you supply will be extremely valuable in evaluating the applicant's potential as a prospective graduate student in Educational Leadership.

How long have you known the applicant ? FROM: \_\_\_\_\_ TO: \_\_\_\_\_

1. Please indicate the situation in which you know or knew the applicant:

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2. Please assess the following characteristics of the applicant on a four-point scale as indicated below:

4=high, top 10%      3=above average, top 25%      2=average, top 50%      1=low, bottom 50%

	low			high
Intellectual independence.....	1	2	3	4
Interest in persons as people (humanistic).....	1	2	3	4
Knowledge of elementary or secondary students.....	1	2	3	4
Realistic understanding of his/her own students.....	1	2	3	4
Ability to learn, change, and grow.....	1	2	3	4
Ability to establish effective relationships.....	1	2	3	4
Capable of expressing ideas clearly: orally.....	1	2	3	4
Capable of expressing ideas clearly: written.....	1	2	3	4
Ability to organize thoughts and materials.....	1	2	3	4
Overall ability as a teacher.....	1	2	3	4
Originality, resourcefulness, versatility.....	1	2	3	4
Acceptance of responsibility.....	1	2	3	4
Tact and ability to work with peers.....	1	2	3	4
Overall potential to be a principal or supervisor.....	1	2	3	4

3. Additional comments regarding applicant's ability and potential as a therapist.

Use additional pages if necessary.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_