Recommendation Form Doctoral Program in Education

Applicant Name (please print):						
Privacy Statement						
The undersigned hereby acknowledges and agrees that in consideration for the sending of a letter of recommendation by that the undersigned waives any right or privilege to inspect or challenge the content						
and comments expressed therein and that such observations shall be and remain confidential as between the writer and McKendree University Graduate School.						
Date: Signature of Applicant						

To Whom It May Concern:

The above applicant has applied for admission to the EdS or EdD in Curriculum Design and Instruction at McKendree University. We would like your appraisal of the applicant's appropriateness to enter the program.

Please make the rank the applicant below:

		Superior Top 2%	Very Good Top 10%	Good Top 25%	Average Middle 50%	Poor Bottom 25%	Unable to Judge
1.	Personal Character – has depicted excellent character attributes including overall personality traits, self-esteem concepts, and interpersonal relationships						
2.	Leadership Dynamic - has depicted leadership qualities within the school setting including student, staff and community entities and initiatives						
3.	Learning Competencies – understands best practice educational pedagogies relative to instructional techniques and student learning outcomes						
4.	Problem Solving – the ability to identify and define problems, as well as, to generate potential effective solutions						
5.	Continuity Integrity – the ability to follow through a project or program from its inception to fruition						
6.	Self –Management - the ability to complete multiple tasks in a timely manner						

Please give examples or details about the applica 1. Leadership experience:	nt in the following areas:					
2. Ability to make a difference in student academi	c performance:					
3. Ability to work with colleagues and staff as a tea	am:					
4. Oral and written communication skills:						
5. Potential to become an educational leader who	can motivate and support f	aculty to promote student learning for all students				
6. Please provide any other insight and knowledge	e you have on the applicant:					
7. How long have you known the applicant:						
Signature:						
Print Name:						
Title:	Date:					
Employer:						
Phone:	Email:					

Please mail directly to:

McKendree University, Office of Graduate Admission, 701 College Road, Lebanon, IL 62254