

KSU STARTALK Chinese Academy for Teachers

RECOMMENDATION FORM:

The applicant named below has applied to attend a two-week Chinese teacher-training program. This program is selective and supports only those who are committed to full and enthusiastic participation in the program. Your candid assessment of the applicant will assist us in making the best decision. Please complete this form, put it in a sealed envelope and write your signature across the sealed area and return it to the applicant before May 1, 2012.

| Your name & position: How long have you known this applicant and in what capacity? | | | | | | | |
|---|------------------|---|----------|------|----------------------------|----------------|--|
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| Please rate the applicant in the | ne following cat | egories: | | | | | |
| | Excellent | Good | Average | Fair | Poor | Unable to rate | |
| Motivation /Interest | | | | | | | |
| Integrity/Responsibility | | | | | | | |
| Ability to work with others | | | | | | | |
| Professional behavior | | | | | | | |
| Teaching skills | | | | | | | |
| Language proficiency in English | | | | | | | |
| Additional Comments: | | | | | | | |
| Overall recommendation: | | Strongly recommend Recommend with reservation | | | Recommend Do not recommend | | |
| | Recommend | with rese | ervation | | ∐ Do n | ot recommend | |