

Certified Applicant Recruitment Process

Thank you for your interest in becoming a certificated employee for the Anchorage School District (ASD). The mission of the District is to educate students for success in life. With this mission in mind, the District seeks to employ highly qualified individuals. The following information is provided to assist you in understanding our selection process.

1) Letter of Application/ Resume

A formal resume and two letters of recommendation may qualify the applicant for the required ASD preliminary screening interview. Two supervisor names and contact phone numbers must be included on the resume for the required ASD reference checks. Applicant's ratings from the interview are strictly confidential as are ASD letters of recommendation, reference checks and placement files. All applicants are required to update their application file annually to include a resume and a letter of recommendation from the immediate supervisor for the current year. If an application packet is not updated for two years, it will be purged and the applicant will need to submit a new application.

2) Screening Interview for Teacher and Related Services positions

Applicants are encouraged to arrange for a screening interview. The Human Resources Office (HR) maintains a list of applicants who request a screening interview and will, as interview teams are finalized, arrange a date-time-location for the interview. Screening interviews are conducted throughout the year. Upon successful completion of the screening interview(s) and the reference checks, the HR will notify applicants in writing of their placement on an "eligible for consideration list." This list is utilized by principals and supervisors to select individuals for formal site interviews. Applicants that are unsuccessful in the screening process will be notified in writing.

3) Screening interviews for Executive Level, Principal and Assistant Principal positions

The screening team may interview all candidates or select an appropriate number for an interview. Screening interviews may be conducted by telephone. For assistant principal and principal positions, qualified members of the Anchorage Principals Association will automatically be granted a screening interview.

4) Formal Interviews

For principal positions, the screening team prepares a list of candidates judged eligible for further consideration by the school committees. Management will also identify principals for transfer candidacy. The appropriate division director communicates with school representatives following the screening interview. The school committee interviews a minimum of three selected candidates. Interview questions are based upon the published school goals and a profile of leadership sought by the school community. Each school team will include a district facilitator (non-rating), three teachers, two students (high school only), two support staff, and five parent representatives. Rated candidates may be required to be interviewed in person by the appropriate division director or by representatives of the instructional team. Candidates for assistant principal shall bypass the school committee interviews and move directly to second-round interviews by a team appointed by the assistant superintendent for instruction. All administrative candidates recommended for appointment by the appropriate division director or the instructional team will be given to the superintendent who will determine if further interviews are needed and who may choose to interview the finalists.

5) Recommendation for Hire

The official ASD application, transcripts, letters of recommendation, current/valid Alaska certification and successful screening interview documents are required to be on file with the Human Resources office prior to the applicant signing an individual contract with the ASD. Hire recommendations are submitted to the Human Resources office. The HR office extends the employment offer. All offers of employment are contingent upon successful completion of the qualifications for appointment and the approval of the School Board. All offers of employment and salary placement are the responsibility of the HR Office. Salary terms and placement are subject to the outcome of collective bargaining.

If you have any questions, please call (907) 742-4115 or access our home page at: <http://www.asd.k12.ak.us/aboutasd/>

Applicant File Instructions

The Anchorage School District requires a certified application for any position that requires an Alaska certificate. A complete application file includes the following:

COMPLETE APPLICATION FORM #1200

Complete all sections of the application form. Do not use "see resume" or an equivalent statement in lieu of completing the requested information.

OFFICIAL TRANSCRIPTS

Official transcripts must have the college or university seal and show degree(s) earned.

LETTERS OF RECOMMENDATION OR PLACEMENT FILE

Two current letters of recommendation on your teaching and/or administrative ability/potential consistent with the position(s) for which you are applying.

CURRENT, VALID ALASKA CERTIFICATE

A condition of employment is the Alaska teaching and/or administrative certificate. The State of Alaska does not have reciprocity with any other state. In addition, all applicants for teacher and administrative certification - with the exception of the related services and trades areas/disciplines - must have taken and passed the Praxis exam. If you have questions regarding certification in Alaska or the Praxis exam requirements, contact the Teacher Certification office at:

State of Alaska, Department of Education Teacher Certification, 810 W. 10th Street, Suite 200 - Juneau, AK 99801-1894, Telephone: (907) 465-2831 E-mail: certify@eed.state.ak.us web address: <http://www.eed.state.ak.us/TeacherCertification/>

The official ASD application, transcripts, letters of recommendation, reference checks, current/valid Alaska certification and successful screening interview documents are required to be on file with the Human Resources office prior to the applicant signing an individual contract with the ASD

We look forward to the opportunity to review your completed application. If you have any questions, call the District at (907) 742-4115



Anchorage School District Certified Application

Human Resources Division
 P.O. Box 196614 - Anchorage, AK 99519-6614
 (907) 742-4115 Main Office
 (907) 742-4176 Fax Number (907) 742-4179 TDD

____ Regular Teacher ____ Substitute Teacher

PERSONAL INFORMATION

Last Name _____ First _____ MI _____		
SS# _____ Previous Name(s) Used _____		
Mailing Address _____ City _____ State _____ Zip _____		
Telephone: Home _____ Work _____ Message _____		
E-mail Address _____		
Permanent Address and Telephone contact: _____		

Please check grade levels for which applying ____ Pre Sch; ____ Elementary; ____ Middle School; ____ High School.

Please list the discipline(s) for which you are qualified to teach based on training, experience, and certification:

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____

Former Anchorage School District Employee? ____ No ____ Yes If Yes, please provide former position(s) and dates: _____

Names and relationships of relatives who work for the Anchorage School District or who serve on the Anchorage School Board (if any): _____

CERTIFICATION INFORMATION

Type of Certificate/Endorsement	State	Expiration Date

Are you First Aid certified? ____ Yes ____ No If Yes, please provide an expiration date _____

EDUCATIONAL AND PROFESSIONAL TRAINING

Name and Location of Institution	From	To	Sem. Hrs	Degree	Major	Minor

ID PURPOSES:		
Last Name	First Name	SS#

STUDENT TEACHING, PRACTICUM OR INTERNSHIP

From Month/Yr	To Month/Yr	Supervisor and Host Teacher(s)	Grade and Subject or Special Service(s) Area	School District

TEACHING EXPERIENCE

From Month/Yr	To Month/Yr	Full Time or Part Time	Grade Level	Supervisor	School District	Sz/ District # Students

Total Years of Teaching Experience _____ Total Years of Special Education/Related Services Experience _____

ADMINISTRATIVE EXPERIENCE

From Month/Yr	To Month/Yr	Full Time or Part Time	Grade Level	Supervisor	School District	Sz/ District # Students

OTHER RELATED WORK EXPERIENCE

*Please include alternative and vocational schools, substitute teaching, college and non-teaching experience.

From Month/Yr	To Month/Yr	Fulltime or PT	Grade Level	Position Held	Supervisor	School District/Other Employer

ID PURPOSES:		
Last Name	First Name	SS#

Are you presently under contract to another school district? ____ Yes ____ No

If Yes, please indicate the contract expiration date _____

EXTRA CURRICULAR ACTIVITIES Please indicate athletic/non-athletic curricular activities that you are willing to assist with or supervise.

Specific Extra Curricular Experience(s)

Professional Organization Membership

Offices Held

Community Involvement

REFERENCES – List two professional references, other than relatives, who have knowledge of your character, work experience, and abilities. At least one must be a previous supervisor.

Teaching: Full Name	Home Phone	Work Phone
Administrative: Full Name	Home Phone	Work Phone

ID PURPOSES:

Last Name

First Name

SS#

GENERAL INFORMATION

“Yes” answers to the following 4 questions will not necessarily result in denial of employment. The District will consider all the circumstances, including the date and nature of events, which have led to the actions described below. Your written explanation will assist the District in determining your eligibility, qualifications, and suitability for employment. Attach additional sheets if necessary.

1. Have you ever been convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)? You must answer “YES” even if the matter was later dismissed, deferred, vacated, or expunged. If you answer “YES” you must provide dates of the proceedings, the court where the proceedings occurred, a statement of the accusation against you and the final disposition of the case(s). ____ YES ____ NO
2. Have you ever been dismissed (fired) from any job or resigned at the request of your employer, or while charges against you or an investigation of your behavior was pending? You must answer “YES” even if the matter was later resolved with any form of settlement or severance agreement, regardless of its terms. If you answer “YES” you must provide the date of termination of employment, the name, address, and telephone number of the employer(s) and a statement of the alleged reasons for termination. ____ YES ____ NO
3. Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending against you before, any licensing, certification or other regulatory agency or body, public or private? If you answer “YES” you must provide the dates of proceedings, name, address, and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition. ____ YES ____ NO
4. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification or other regulatory body (teacher certification or otherwise) or by your current or any previous employer? If you answer “YES” you must provide the name, address and telephone number of the employer or licensing body and a statement of the accusations against you. ____ YES ____ NO

APPLICANT NOTE

It is my understanding that as part of the Anchorage School District procedures for processing my employment application, a background report may be made with a allows access to confidential and proprietary information and systems. Information is obtained through third parties, such as business associates, financial sources, present and previous employers, Alaska State Troopers, Federal Bureau of Investigation, or others familiar with my background. This inquiry may include confirmation and information as to my character, general reputation, personal characteristics, previous employers, educational background, current and previous residence locations for the last five years, military service, credit rating, and conviction records. I hereby authorize the Anchorage School District to obtain from my former employers and listed references all data needed to support this application. I agree that reference material may be kept in confidence, and that the Anchorage School District, its agents or employees may not be liable in any manner for relying on material contained in this application, including references in making employment decisions. It is my understanding that after an offer of employment and prior to reporting to work, I will be required to submit to a medical review. Depending on District policy and the needs of the job, I may be required to be examined by a medical professional designated by the District. It is my understanding that the use of illegal drugs is prohibited during employment. If District policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment. It is my understanding that employment with the Anchorage School District is offered only from the Human Resources Division and must be ratified by the School Board.

EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Anchorage School District to provide equal educational and employment opportunities and to provide services and benefits to all students and employees without regard to race, color, religion, physical disability, national origin, gender, or other prohibitions. This policy of the Anchorage School District is consistent with applicable laws, regulations, and executive orders enforced by various federal, state, and municipal agencies. Inquiries or concerns may be addressed to the District’s Equal Employment Opportunity Department.

CERTIFICATION AND RELEASE

I certify that I have read and understand this application form including the information and instructions and the Applicant Note above and that all statements made on this application are true and complete to the best of my knowledge. Any false statements on this application or during interviews will subject me to disqualification or immediate dismissal.

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Signature of Applicant

Date of Application

CONSENT TO RELEASE INFORMATION - RELATED TO EMPLOYMENT

To: (Name of Prior Employing School District) _____

From: (Applicant's Name) _____

In recognition of the need for information on the part of the Anchorage School District in order to evaluate my application for employment with the District, I hereby waive to the following extent protection of confidentiality, whether provided by AS 14.20.149 (h) or by any other law, bylaw, policy, or contract provision, which may pertain to the evaluation of my performance as an employee of your School District. You are authorized to release to the Anchorage School District copies of documents concerning me and to discuss any information concerning me with the Human Resources Division or designee of the Anchorage School District, so long as the documents and information are related to:

- The prior employing School District certified employees' evaluation system,
- Any other evaluation system(s) used by your District, or
- Matters contained in files maintained by my supervisor or by the human resources division, or other similar division, of prior employing School District.

This waiver of confidentiality and consent to release information does not extend to the following:

Dated this _____ day of _____, _____.

Applicant's Signature: _____

EQUAL EMPLOYMENT OPPORTUNITY SURVEY (COMPLETION OF THIS PORTION OF THIS SHEET IS VOLUNTARY)

State law requires that employers keep records on the race, sex and age of applicants and employees to facilitate the enforcement of equal employment opportunity laws. This statement will be filed separately from all of your other application and employment records. As required by state law, it will be available only to the Anchorage School District's Human Resources Division and Equal Employment Opportunity Department personnel and federal and state employment enforcement officers. Please complete the following information and return it with your application to the Human Resources Division.

Last Name	First Name	M.I.	Social Security Number

APPLYING FOR:

RACE, ETHNICITY, AND GENDER INFORMATION

Race / Ethnicity	Male	Female
Alaska Native		
American Indian/Native American		
Asian or Pacific Islander		
African-American		
Hispanic		
White		

DEFINITIONS OF RACIAL/ ETHNIC GROUPS

- ALASKA NATIVE:** A person having origins in any of the original peoples of Alaska and who maintains cultural identification through tribal affiliation or community recognition.
- AMERICAN INDIAN/ NATIVE AMERICAN:** A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.
- ASIAN AMERICAN:** A person having origins in any of the original peoples of the Indian Subcontinent, Pacific islands, or the Far East; for example, China, Japan, Korea.
- AFRICAN-AMERICAN:** (not of Hispanic origin); any person having origins in any of the Black racial groups of Africa.
- HISPANIC:** Any person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- WHITE:** (not of Hispanic origin); any person having origins in any of the original peoples of Europe, North Africa or the Middle East.

Anchorage School District

Employee Relations Division/Human Resources Dept
 P.O. Box 196614
 Anchorage, AK 99519-6614
 (907) 742-4115 Main Office
 (907) 742-4176 Fax Number
 (907) 742-4179 TID

CONFIDENTIAL REFERENCE/ RECOMMENDATION FOR TEACHER APPLICANT

Teacher Applicant: It is your responsibility to deliver this form to the reference you indicate in the box below. The form should be returned in a sealed envelope with the type of reference (University/College Supervisor, Recent Principal/Supervisor, etc.) indicated on the outside of the envelope.

<p>TO: [Name and Address of Reference]</p> 	<p>Applicant's Name, Address, and Social Security No.</p>
<p>Your name has been given as a reference by the applicant named above who is applying for a teaching position with this District. Please provide your evaluation of the applicant's ability and potential for success as a teacher. Please return the form to the Anchorage School District at the address shown above. The District will keep your response in confidence. Thank you for your assistance.</p>	<p>Relationship to Applicant: [Please check one]</p> <p><input type="checkbox"/> University/college professor</p> <p><input type="checkbox"/> Recent principal/supervisor [last two years] Date: _____</p> <p><input type="checkbox"/> Past principal/supervisor [more than two years ago] Date: _____</p> <p><input type="checkbox"/> Other: _____</p>

Evaluation and Assessment

Based on your past experience with teachers, rate the characteristics below using the following scale: Excellent (4), Above Average (3), Average (2), Below Average (1).

____ 1. Scope/Quality of Teaching Experience	____ 8. Growth Potential	____ 15. Instructional Methods and Planning
____ 2. Skill as a Teacher	____ 9. Judgment/Tact	____ 16. Motivation of Students
____ 3. Knowledge of Relevant Curriculum	____ 10. Initiative/Motivation	____ 17. Evaluation of Student Performance
____ 4. Discipline and Control	____ 11. Poise	____ 18. Interpersonal Relationships with Students
____ 5. Verbal Communication	____ 12. Emotional Stability	____ 19. Interpersonal Relationships with Parents
____ 6. Written Communication	____ 13. Attention to Detail/Organization	____ 20. Interpersonal Relationships with Other Faculty/Staff
____ 7. Self Confidence/Assertiveness	____ 14. School/Community Involvement	____ 21. Interpersonal Relationships with Principals/Supervisor

If you were a previous supervisor, please respond to the following. Otherwise, skip this section. If the applicant was previously employed under your supervision, did the applicant leave employment: [] voluntarily or [] involuntarily? Is the applicant eligible for rehire? [] Yes [] No If the answer is No, please explain on the reverse side of this form.

Please add comments regarding the applicant which you feel would be helpful in our consideration of their application for employment. (Please use the reverse side if necessary.)

Signature _____ Position _____ Date _____

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CONFIDENTIAL REFERENCE/ RECOMMENDATION FOR TEACHER APPLICANT

Teacher Applicant: It is your responsibility to deliver this form to the reference you indicate in the box below. The form should be returned in a sealed envelope with the type of reference (University/College Supervisor, Recent Principal/Supervisor, etc.) indicated on the outside of the envelope.

<p>TO: [Name and Address of Reference]</p>	<p>Applicant's Name, Address, and Social Security No.</p>
<p>Your name has been given as a reference by the applicant named above who is applying for a teaching position with this District. Please provide your evaluation of the applicant's ability and potential for success as a teacher. Please return the form to the Anchorage School District at the address shown above. The District will keep your response in confidence. Thank you for your assistance.</p>	<p>Relationship to Applicant: [Please check one]</p> <p><input type="checkbox"/> University/college professor</p> <p><input type="checkbox"/> Recent principal/supervisor [last two years] Date: _____</p> <p><input type="checkbox"/> Past principal/supervisor [more than two years ago] Date: _____</p> <p><input type="checkbox"/> Other: _____</p>

Evaluation and Assessment

Based on your past experience with teachers, rate the characteristics below using the following scale: Excellent (4), Above Average (3), Average (2), Below Average (1).

____ 1. Scope/Quality of Teaching Experience	____ 8. Growth Potential	____ 15. Instructional Methods and Planning
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If you were a previous supervisor, please respond to the following. Otherwise, skip this section. If the applicant was previously employed under your supervision, did the applicant leave employment: [] voluntarily or [] involuntarily? Is the applicant eligible for rehire? [] Yes [] No If the answer is No, please explain on the reverse side of this form.

Please add comments regarding the applicant which you feel would be helpful in our consideration of their application for employment. (Please use the reverse side if necessary.)

Sig na ture Po si tio n Da te

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CONFIDENTIAL REFERENCE/ RECOMMENDATION FOR ADMINISTRATIVE POSITION

Administrative Applicant: It is your responsibility to deliver this form to the reference you indicate in the box below. The form should be returned in a sealed envelope with the type of reference (University/College Supervisor, Recent Principal/Supervisor, etc.) indicated on the outside of the envelope.

<p>TO: [Name and Address of Reference]</p>	<p>Applicant's Name, Address, and Social Security No.</p>
<p>Your name has been given as a reference by the applicant named above who is applying for an administrative position with this District. Please provide your evaluation of the applicant's ability and potential for success as an administrator. Please return the form to the Anchorage School District at the address shown above. The District will keep your response in confidence. Thank you for your assistance.</p>	<p>Relationship to Applicant: [Please check one]</p> <p><input type="checkbox"/> University/college supervisor</p> <p><input type="checkbox"/> Recent supervisor [last two years] Date: _____</p> <p><input type="checkbox"/> Past supervisor [more than two years ago] Date: _____</p>

Evaluation and Assessment

Based on your past experience with administrators, rate the characteristics below using the following scale: Excellent (4), Above Average (3), Average (2), Below Average (1).

____ 1. Professional Experience	____ 9. Judgment/Tact	____ 17. Technical Skills
____ 2. Skill as an Administrator	____ 10. Initiative/Motivation	____ 18. Critical Judgment
____ 3. Knowledge of Management Principles	____ 11. Poise	____ 19. Time Management
____ 4. Leadership Ability	____ 12. Emotional Stability	____ 20. Ability to Evaluate Staff
____ 5. Verbal Communication	____ 13. Attention to Detail/Organization	____ 21. Interpersonal Relationships
____ 6. Written Communication	____ 14. Supervisory Skills	____ 22. Financial Management
____ 7. Self Confidence/Assertiveness	____ 15. Experience in Working with Different Kinds of Groups	
____ 8. Growth/Advancement Potential	____ 16. Motivation of Staff/Others	

If you were a previous supervisor, please respond to the following. Otherwise, skip this section. If the applicant was previously employed under your supervision, did the applicant leave employment: [] voluntarily or [] involuntarily? Is the applicant eligible for rehire? [] Yes [] No If the answer is No, please explain on the reverse side of this form.

Please add comments regarding the applicant which you feel would be helpful in our consideration of their application for employment. (Please use the reverse side if necessary.)

Signature _____ Position _____ Date _____

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CONFIDENTIAL REFERENCE/ RECOMMENDATION FOR ADMINISTRATIVE POSITION

Administrative Applicant: It is your responsibility to deliver this form to the reference you indicate in the box below. The form should be returned in a sealed envelope with the type of reference (University/College Supervisor, Recent Principal/Supervisor, etc.) indicated on the outside of the envelope.

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> TO: [Name and Address of Reference] </div>	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Applicant's Name, Address, and Social Security No. </div>																								
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