## CAREER SERVICES

MONTANA STATE UNIVERSITY-BILLINGS
1500 University Drive
Billings, MT 59101-0245
(406) 657-2168

## RECOMMENDATION FOR THE CREDENTIAL FILE OF:

Candidate's Name
(please print)

To the Writer: Under the Family Education Rights and Privacy Act, the candidate named above will have access to your recommendation unless the Waiver of Access to This Recommendation at the bottom section of this form is signed. If it is signed, this recommendation will be kept confidential from the candidate.
Please complete and return this recommendation directly to the Career Services Office at the address above.

| PLEASE CHECK APPROPRIATE BOX | NOT <br> APPLICABLE |  | SUPERIOR |  |  |  | ABOVE AVERAGE |  |  |  | AVERAGE |  |  | $\begin{gathered} \text { BELOW } \\ \text { AVERAGE } \\ \hline \end{gathered}$ |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Ability to get along with people |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ability to make decisions |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ability to work without supervision |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Adaptive to change |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bearing, poise, self-confidence |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cooperation |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dependability |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Effectiveness in speaking |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Effectiveness in written expression |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Enthusiasm for assigned tasks |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Knowledge of subject matter |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Leadership potential |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Organizational skills |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Professional appearance |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Reaction to advice and criticism |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sensitivity to diversity |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## Writer, please provide additional significant information which might be of value in rating this person. Use letterhead if desired.

| Writer's Name (print) |  |  |  |
| :--- | :--- | :--- | :--- |
| Signature |  | Phone |  |
| Organization |  | Title |  |
| Address |  | City/State/Zip |  |
| CANDIDATE'S WAIVER OF ACCESS TO THIS RECOMMENDATION <br> I waive my right of inspection and wish this recommendation to be confidential. |  |  |  |
| (Signature) |  |  |  |

