



800 Troy-Schenectady Road, Latham, NY 12110-2455  
 518-213-6000 800-528-6208 Fax 518-213-6456  
[www.nysut.org/elt](http://www.nysut.org/elt)

# RECOMMENDATION FORM

## Part A – To be completed by the applicant

\_\_\_\_\_  
*Last Name* *First Name* *Middle Initial*

\_\_\_\_\_  
*Street Address (PO Box)* *City* *State* *Zip*

## Part B – To be completed by the administrator/colleague

	Below Average	Average	Above Average	Inadequate Opportunity to Observe
Ability to work with others				
Creativity and Imagination				
Maturity				
Self-Confidence				
Communication Skills (Written)				
Communication Skills (Oral)				
Analytic Ability				
Motivation				
Technology Capability				
Peer Respect				
Leadership Ability				
Presentation Skills				

How long have you know the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

Please indicate the strength of your overall endorsement of the applicant by placing an "X" appropriate box:

Unable to Observe	Not Recommended	Recommended with Some Reservations	Recommended	Highly Recommended

Name (typed or printed) \_\_\_\_\_

Signature \_\_\_\_\_

Position \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

**Part C – Optional**

Additional Comments:

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Please mail this form to: NYSUT ELT  
Attn: Cathy Yankowski  
800 Troy Schenectady Road  
Latham, NY 12110  
*or*  
Fax: 518-213-6456