

USC Upstate Graduate Programs Recommendation Form

TO BE COMPLETED BY THE APPLICANT: Fill in your name, date of birth, degree and department, before giving this form to the person recommending you.

You have been listed as a reference for:

_____ Birth Date (Day/Month/Year)
 _____ Legal Name of USC Upstate Applicant (Last Name, First Name)

who is applying for the _____ program in the School of Education.
 _____ Degree

TO THE STUDENT: If you prefer this to be a confidential letter of reference, you must sign and date the waiver of access below.

WAIVER OF ACCESS: I, the undersigned, waive the right of personal access to the reference.

Signature: _____ Date: _____

TO BE COMPLETED BY THE PERSON OFFERING RECOMMENDATION:

1. How well do you know the applicant? How long, and in what capacity? _____

2.	High (top 10%)	Above Average (top 25%)	Average (middle 50%)	Low (bottom 25%)	No Basis for Judgement
Skill in planning					
Knowledge of content					
Implementation of instruction					
Skill in assessment of student learning					
Organization and management of classroom					
Willingness to provide additional support for student learning					
Effectiveness of oral and written language					
Skill in use of educational technology					
Level of diversity awareness					
Participation in professional development opportunities					
Enthusiasm for learning and teaching					
Potential for leadership					

3. _____ Recommend Highly _____ Recommend with Reservation
 _____ Recommend _____ Not Recommended

4. Additional Remarks: Please attach remarks on a separate piece of paper.

Date _____ Signature _____

Name _____ Title _____

Address _____

Please return to: **USC Upstate, Graduate Education Programs, 800 University Way, Spartanburg, SC 29303**

*The University of South Carolina offers equal opportunity in its employment, admissions, and educational activities,
in compliance with Title IX and other civil rights laws.*