

Doctor of Education in Educational Leadership Recommendation Form

To the candidate:

This form must be e-mailed directly from the person making the recommendation to graduate@nku.edu. Candidates may not ask to view their recommendation forms after they are completed. Therefore, you are waiving your right to review your recommendations.

To the recommender:

The candidate who has asked you to fill out this recommendation form has applied to the Doctor of Education in Educational Leadership. Please complete the following questionnaire rating the candidate's professional competence in comparison with other known individuals at a similar stage in their careers. Please place an "X" in one box for each skill.

On behalf of who are you writing this recommendation and how long have you worked with the candidate?

Candidate's first and last name: _____ Length of time: _____

Relationship with the candidate: ___ Colleague ___ Supervisor ___ University Professor ___ Mentor

	Below Average	Average	Above Average	Exceptional	Inadequate Opportunity to Rate
Problem Solving					
Leadership					
Collaboration					
Teamwork Skills					
Knowledge in Field					
Motivation & Initiative					
Emotional Stability & Maturity					
Work Ethic & Drive					
Oral Communication Skills					
Written Communication Skills					
Analytical Skills					
Creativity					
Conflict Resolution					

Recommender's information:

Your First and Last Name: _____ Your Title: _____

Your Phone Number: _____ Your E-mail: _____

Your initials here serve as your official signature: _____ Date: _____

Any additional comments you would like to share? _____

This form must be e-mailed directly from the person making the recommendation to graduate@nku.edu. It is necessary to save the form before you e-mail it to ensure the information entered is retained. Thank you.