

Reference Report on Applicant for Admission Educational Leadership Program

Student _____
 Address _____

Department of Educational Leadership
 Wichita State University
 Campus Box 142
 Wichita, KS 67260-0142

Degree for which the student is applying Master's in Educational Leadership

I do do not waive my right to see this report _____
Signature of Applicant

Respondent _____
Name

Title

Address _____

For how long have you known the applicant? _____

In what capacities have you known the applicant? _____

The Admissions Committee would appreciate your professional estimate of the applicant's personality, aptitude for advanced graduate study, and future career potential. Please check the appropriate box below.

Qualities	Below Average	Average	Above Average	Superior	Truly Exceptional	Inadequate Opportunity To Observe
	Lowest 40%	Middle 20%	Next 15%	Next Highest 15%	Highest 10%	
Ability to Communicate						
Cooperation and Dependability						
Emotional Stability						
Flexibility						
Leadership						
Motivation and Initiative						
Originality						
Past Success as a Student, Colleague, or Employee						
Personal Relationships						
Professional Attitude						
Promise for Research						
Promise of a Successful Career in above Named Specialization						
Overall Potential for Graduate Study						

If you had the opportunity, would you hire this candidate for a position in educational administration? Yes No

Date

Signature of Respondent

Please use reverse for any other comments you want to make.

WHEN COMPLETED, PLEASE RETURN TO THE DEPARTMENT ADDRESS IN THE BOX ABOVE