

CALIFORNIA STATE UNIVERSITY, LOS ANGELES

Charter College of Education
Division of Applied and Advanced Studies in Education

Greetings from the Charter College of Education at California State University, Los Angeles!
_____ has applied for admission to the Mastery Option of the Professional Administrative Services Credential Program, and designated you as a person qualified to comment upon his/her qualifications. We appreciate your assistance in evaluating the applicant's ability and disposition to meet the standards of administrative training and graduate studies.

Because of the unique feature of our program where candidates will need to demonstrate their competence in meeting the professional standards established by the California Commission on Teacher Credentialing, we need to ensure that our candidates possess *intellectual abilities and maturity* to engage in rigorous assessment procedures. As accredited by both the National Council on Accreditation of Teacher Education (NCATE) and the California Commission on Accreditation (CCOA), our program admits candidates who meet high academic standards and demonstrate successful achievement as professional school administrators. Your candid evaluation of this applicant will help us strengthen our program by admitting only qualified candidates and send only competent and professional graduates to better serve our children in K-12 schools.

Please complete and return the recommendation form to the applicant in a sealed envelope so that s/he can submit it to our office.

We want you to know that your recommendation letter is reviewed very carefully by a team of faculty who value your judgment very highly. Thank you so much for your assistance in preparing professional leaders for our public schools.

Sincerely,

Lori Kim, Ph.D.
Educational Administration Program Chair

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*NOTE TO THE STUDENT: This recommendation is not confidential and is open to access by the candidate concerned *unless the candidate waives his/her right by signature below*. This is in accordance with the Family Educational Rights and Privacy Act of 1974. Please collect this form and the recommendation letter in a **sealed** envelope for submission to our office.

I understand that this completed recommendation will be used solely for academic and admission purposes. I hereby waive my right of access.

Candidate's Signature _____ Date _____

RECOMMENDATION FORM

Name of the Applicant: _____

Name/Title of the Recommending Person: _____

Please provide your honest opinion about the applicant using the following scale:

Summary of Rating:

4--- Excellent: Candidate demonstrates characteristics for **strong** leadership.

3--- Above average: Candidate demonstrates characteristics for leadership.

2--- Average Candidate demonstrates characteristics for leadership **potential**.

1--- Needs to improve Candidate exhibits little or no characteristics for leadership.

NA--- No opportunity to judge

Excellent ← → Needs to improve

Characteristics:	4	3	2	1	NA
1. Oral communication skills					
2. Written communication skills					
3. Ability to work cooperatively with others					
4. Ability to work with individuals from diverse backgrounds					
5. Organizational ability					
6. Meets deadlines					
7. Ability to facilitate groups					
8. Ability to involve families and community					
9. Initiative					
10. Self-confidence					
11. Creativity/Innovative					
12. Resourcefulness					
13. Intellectual ability to pursue rigorous academic demands					
14. Willingness to take on extra responsibilities					
15. Actions demonstrate sound judgment					
16. Professionalism in stressful situations					
17. Sensitivity towards persons with disabilities					
18. Self-Discipline					
19. Adherence to moral and ethical standards of behavior					

Please note that a **recommendation letter** in addition to this form would greatly enhance the candidate's potential for admission to the program. Thank you so much for your support.