

North Dakota State University Extension Service Reference Form

Applicant's name _____

1. Your association with the applicant:

1a. Approximate dates of association:

- Employer Teacher Co-Worker
 Other (specify: _____)

From _____

To _____

Based on your experience with this applicant, please assess the following:

	Unknown	Outstanding	Above Average	Average	Below Average	Inadequate
2. Technical competence (see enclosed position description)						
3. Ability to work effectively with people						
4. Leadership ability						
5. Cooperativeness						
6. Dependability						
7. Interpersonal skills						
8. Initiative/motivation						
9. Ability to accept criticism						
10. Ability to communicate	Speaking					
	Writing					

Comments:

11. Do you recommend this person for this position with the NDSU Extension Service?

- Yes No Why or why not? Please be specific.

12. To your knowledge has this person ever been discharged, demoted, suspended or resigned after being told his or her conduct or work was not satisfactory?

- Yes No If yes, please explain.

Name _____ Title _____ Daytime phone # _____

Signature/Date _____ / _____

(Feel free to add comments on a second page if needed.)