

MARSHALL UNIVERSITY CAREER SERVICES

Faculty Reference Form

Candidate's Name _____

Date _____

Student ID # _____

| Please rate the candidate using the following criteria: | Superior | Strong | Average | Fair | Poor | No Opinion |
|---|----------|--------|---------|------|------|------------|
| Knowledge/understanding of course subject matter | | | | | | |
| Verbal and written communication skills | | | | | | |
| Class attendance and punctuality | | | | | | |
| Contribution to class discussions | | | | | | |
| Evidence of personal/academic growth | | | | | | |
| Cooperative attitude toward peers and instructors | | | | | | |
| Accuracy and timeliness of assigned work | | | | | | |
| Leadership, maturity, and decision-making skills | | | | | | |
| Initiative and enthusiasm | | | | | | |
| Overall class performance | | | | | | |

Additional Comments: _____

Name & title of person providing reference: _____ **Phone:** _____

University Department _____

I have known the candidate as: ☐ a student ☐ an employee ☐ personally **I have known the candidate:** _____
(length of time)

<http://www.marshall.edu/career-services>