REFERENCE FOR GRADUATE ASSISTANSHIP WITH H.E.L.P.

(Higher Education for Learning Problems)

MARSHALL UNIVERSITY

Name of Person Receiving Reference_____

How long have you known this person?_____
_____

In what capacity?_____

How would you rank this person when compared with others you have known or taught?_____
_____

Do you believe this person would make a good tutor?_____
_____
_____

What do you see as this person's strengths?_____
_____

What do you see as this person's weaknesses?_____
_____

If you have any knowledge of the applicant's spelling and written language skills, please comment:_____
_____
_____
_____

Your Name_____**Date**_____

Position_____**Location**_____

Please Return to: Debbie Painter Director
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Email: painter@marshall.edu