

## Resident Assistant Recommendation Form

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Under the Family Rights Act of 1974, students enrolled at the University of New Haven have access to letters of recommendation. However, students may waive their right to see letters of recommendation, whereupon such letters will be held in confidence. If the applicant has not signed a waiver, it is assumed that this letter is submitted with the recommender's understanding that the applicant may request to see the letter. Please be advised that a letter of recommendation not accompanied by a waiver statement by the applicant will be accessible by the applicant according to the Family Education Rights and Privacy Act of 1974.

**I have retained my right of access to this recommendation**

**I have waived my right of access to this recommendation**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

To be completed by the recommender:

\*\*\* In addition to your recommendation statement, please also fill out the back portion of this recommendation form.

Name \_\_\_\_\_ Title \_\_\_\_\_

*In your own words, please describe how long and in what capacity you have known the candidate. Also, describe why this candidate should be considered for the Resident Assistant position at UNH. Please attach additional sheets if necessary.*

**Please assess the applicant's strengths and areas which need further development in relation to characteristics below using the following scale:**

- Excellent (5):** Seems to have superior knowledge or expertise
- Above Average (4):** Seems to have strong knowledge or expertise
- Average (3):** seems to have some knowledge or expertise
- Below Average (2):** Seems to have limited knowledge or expertise
- Poor (1):** Seems to have no knowledge or expertise
- U/J:** Unable to judge candidate on this dimension

- |   |  |
|---|--|
| <input type="checkbox"/> Approachability            | <input type="checkbox"/> Fairness                                |
| <input type="checkbox"/> Listening Ability          | <input type="checkbox"/> Willingness to take interpersonal risks |
| <input type="checkbox"/> Awareness of Differences   | <input type="checkbox"/> Ability to balance multiple tasks       |
| <input type="checkbox"/> Trustworthiness            | <input type="checkbox"/> Level of respect by his/her peers       |
| <input type="checkbox"/> Diplomacy                  | <input type="checkbox"/> Dependability                           |
| <input type="checkbox"/> Leadership skills          | <input type="checkbox"/> Flexibility/Adaptability                |
| <input type="checkbox"/> Respect for others         | <input type="checkbox"/> Respect for supervisors                 |
| <input type="checkbox"/> Creativity                 | <input type="checkbox"/> Ability to work on a team               |
| <input type="checkbox"/> Maturity                   | <input type="checkbox"/> Problem solving skills                  |
| <input type="checkbox"/> Appreciation for Diversity | <input type="checkbox"/> Organizational skills                   |
| <input type="checkbox"/> Accountability             | <input type="checkbox"/> Ability to confront appropriately       |

*How would you assess the applicant's overall performance as a potential Resident Assistant? \_\_\_\_\_*

- (3) Recommend this applicant without reservation
- (2) Recommend this applicant strongly with few reservations
- (1) Have reservations about hiring this candidate

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

*Please return to Becca Kitchell, Assistant Director of Residential Life, in the Office of Residential Life or please mail it to:*

***Rebecca Kitchell  
University of New Haven  
300 Boston Post Road  
West Haven, CT 06516***

***Or Fax to: 203-932-7178***

***No Later Than September 24<sup>th</sup>***