

## Credential Program Recommendation Form

The person named below is an applicant to a Credential Program at Fresno State. Please indicate your judgment of the applicant's qualifications for the teaching profession by completing this form. This recommendation may be seen by the applicant and will be used as part of the criteria for admission.

Applicant's Name:	Credential Subject Area:				
Name of Evaluator:	Evaluator Email/Phone:				
In what capacity do you know the applicant?	How long have you known the applicant?				
Thinking of this person as a candidate for the teaching profession, please rate them in the following areas by placing a checkmark (✓) in the appropriate box.					
	Not observed	Exceptional	Very Good	Good	Poor
General Attitude					
Responsibility					
Initiative/Enthusiasm					
Verbal Skills					
Writing Skills					
Subject Knowledge					
Professionalism					
Rapport with Peers					
Rapport with Instructor(s)					
Overall Rating					
Comments:					
Based on your experience, do you think this person has the potential to be an effective teacher? Yes: <input type="checkbox"/> No: <input type="checkbox"/> If no, please explain:					
Evaluator's Signature:			Date:		
Evaluator's Position/Title:			Evaluator's Place of Employment:		

Directions to Evaluator: Return this completed form to the applicant to include with their credential program application. Or you may scan and email the form to the Credential Admissions Committee at: [KremenCredApp@mail.fresnostate.edu](mailto:KremenCredApp@mail.fresnostate.edu).