

Learning Assistance and Resource Center

RECOMMENDATION FOR TUTORING POSITION

Dear Colleague:

The student named below is applying for a tutoring position at the Learning Assistance and Resource Center. Please take a few minutes to evaluate this applicant in the areas outlined.

APPLICANT

Name (last, first)	Date
Subject/Course:	
I waive ____ retain ____ the right to view the recommendation.	

EVALUATION

How long and in what capacity have you known the applicant? What comparison group are you using as a basis for evaluating this applicant?

Please rate the applicant on a scale of 1 to 5 (highest is 5) in the following areas: (Circle the appropriate number.)

Subject competence	5	4	3	2	1	?
Dependability	5	4	3	2	1	?
Oral Communication	5	4	3	2	1	?
Written Communication	5	4	3	2	1	?
Scholarship	5	4	3	2	1	?
Relationship with peers	5	4	3	2	1	?

Please comment on the applicant's academic performance.

What are the applicant's strengths/weaknesses?

Please comment on the applicant's potential as a tutor.

Name

Position

Signature

Phone

**Return this form to: Gerardina L. Martin, Learning Assistance and Resource Center,
223 Lawrence, West Chester University, West Chester, PA 19383.**

If you prefer, you may fax this form to (610) 436-2600 or email it to gmartin@wcupa.edu.