

Student Orientation Coordinator APPLICANT REFERENCE FORM

Name of applicant:		Class Year:		Phone Numb	oer:	
Name of applicant: I waive my right to see this form af I DO NOT waive my right to see thi	ter completion"			- 		
I DO NOT waive my right to see thi Applicant Signature:						
ppheant dignature.		_ If serialing by em	an, an X on	triis iirie serves as	your signature	
		rm to the Office of			-	
or send by e-	mail to Ruth Sam	iia no later than Fr	iday, warch	16, 2013 @ 4:30	pm.	
EFERENCE – The student named a	above is applying fo	or the position of Stu	dent Orientati	on Coordinator at	Wellesley Colle	ge. Ple
omplete the following section:						
eference Name, Title and Place of I	Employment:					
ererence Name, Title and Flace of I	inployment					
mail address:		Ph	one number:			
Ve are interested in your comments	about the applicar	nt. How long have yo	ou known this	student, and in w	hat capacity?	
ased on your knowledge of the app	olicant, please circle	e or highlight a respo	nse to each it	em listed.		
ral Communication Skills	Poor	Fair	Average	Good	Excellent	NI/A
ral Communication Skills ritten Communication Skills	<u> </u>	2	3	4	5 5	N/A N/A
stening Skills	<u>'</u> 1	2	3	4	5	N/A
oproachability	1	2	3	4	5 5	N/A
nthusiasm/Motivation	1	2	3	4	5	N/A
pility to Handle Conflict	<u>·</u> 1	2	3	4	5	N/A
itiative	<u>·</u> 1	2	3	4	5	N/A
pen Mindedness	1	2	3	4	5	N/A
aturity	1	2	3	4	5	N/A
/illingness to Accept Direction	1	2	3	4	5	N/A
ependability/Reliability	1	2	3	4	5	N/A
rganizational Skills	1	2	3	4	5	N/A
nowledge of Campus Resources	1	2	3	4	5	N/A
verall Comments (feel free to us	e an additional she	et or attach a senara	ate letter):			
verali comments (reer free to us	e an additional sile	et or attacir a separa	ne letter).			
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ased on your knowledge of the app	olicant, please circle	e or nighlight your re	commendation	n below:		
trongly R ecommend	Recommend	Recommend	with Reserva	tions	Do Not Red	comme
eference Signature:				Date:		