

**FACULTY RECOMMENDATION FOR STUDENT’S ADMISSION INTO THE TEP**

Please provide information about the student named below using the following scale. Place the appropriate number in the parenthesis preceding each item.

5=Strongly agree with statement      4=Agree with statement      3=Neutral/Undecided  
2=Disagree with statement      1=Not observed

Applicant’s Printed Name: \_\_\_\_\_

- ( ) This is the kind of person I would want to teach my child or a child dear to me.
- ( ) This is the kind of person I would want to represent Alice Lloyd College in the teaching profession.
- ( ) This person has initiative and perseverance.
- ( ) This person has appropriate interpersonal skills indicative of success as a classroom teacher.
- ( ) This person demonstrates integrity and trustworthiness.
- ( ) This person is a serious and conscientious student.
- ( ) I recommend this person for admission to the Teacher Education Program.

It will be very helpful if you can address this person’s unique qualities (work-study responsibility, class assignment responsibility, punctuality and quality of class assignments, etc.)

Faculty Member: \_\_\_\_\_

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

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To the Student:

\_\_\_\_ I do not give up the right to see this reference.

\_\_\_\_ I do give up the right to see this reference.

**Applicant’s Signature:**

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