Department of Catholic Schools
Archdiocese of San Antonio
2718 W. Woodlawn Ave
San Antonio, Texas 78228
(210) 734-2620 • Fax: (210) 734-9112
www.sacatholicschools.org

TO THE APPLICANT:
Please give this professional reference form to the person you want to recommend you. Please request that the reference person complete this form and mail it back to the Department of Catholic Schools, attention Teacher Recruitment.

A letter of recommendation or placement folder may be included along with this form.

APPLICANT NAME _____ SOCIAL SECURITY NO. _____ DATE _____

STATEMENT OF AUTHORIZATION:
"I hereby give the Department of Catholic Schools permission to make inquires of reference with former employers concerning my general character and professional performance. I hereby authorize the party receiving this form to give full and complete information as may be requested by them or me. I further agree that the information will not be disclosed to me, but will be treated as confidential, and I waive my right to see this information."

_____
APPLICANT'S SIGNATURE / DATE

		EXCELLENT	VERY GOOD	AVERAGE	FAIR	POOR
General Appearance	(attractive, neat)					
Attendance						
Personality	(wholesome, pleasing)					
Social Qualities	(maturity, communication)					
Character	(evidence of strength)					
Ethics	(professional relationships)					
Emotional Stability	(self-control, adjusted)					
Citizenship	(community standing)					
Oral Communication Skills						
Written Communication Skills						
Intellectual Capacity	(alert, responsive)					
Knowledge Of Subject Area						
Attitude Toward Students	(interested, caring)					
Attitude Toward Teaching						
Leadership Skills	(if applicable)					
Communication With Parents	(professionally effective)					
Discipline	(effective, constructive)					
Up-To-Date Professionally	(continual professional growth)					
Overall General Rating						

How long have you known the applicant? _____
Would you recommend him/her for employment as a teacher / administrator? _____
If no, why not? _____
The above information is based on: (check the items which apply)

- ☐ Personal acquaintance with applicant.
- ☐ Worked under my supervision.
- ☐ Student teacher under my supervision.
- ☐ Student in my class.

Comments:

REFERENCE'S NAME _____ INSTITUTION _____ POSITION _____

_____
REFERENCE'S SIGNATURE / DATE