




PROFESSIONAL REFERENCE

Westminster Academy
5601 North Federal Highway
Fort Lauderdale, FL 33308
954.771.4600 | 954.334.6126

APPLICANT _____ **DATE** _____

POSITION APPLIED FOR _____

Your name has been given to us as a reference for the above-named individual. Please indicate your evaluation of each category below as it pertains to your knowledge of the applicant. Your candid and professional judgment is most helpful to us. Your reply will be kept in strictest confidence. Thank you for your kind consideration in completing this form.

In Christ,

Mr. Joel Satterly
Headmaster

PLEASE GIVE YOUR CONFIDENTIAL EVALUATION OF THE APPLICANT BY CHECKING THE APPROPRIATE SPACE

	Excellent	Good	Acceptable	Needs More Attention	Insufficient Data
Character					
Appearance					
Courtesy, consideration of others					
Judgment, tact, self-control					
Scholarship					
Daily preparations					
Ability to inspire others					
Instructional skill					
Classroom management					
Cooperation with administration					
Cooperation with fellow workers					
Participates in professional growth endeavors					
Health and vitality					
Initiative					
Warmth/sense of caring					
Enthusiasm					
Acceptance by students					
Acceptance by parents					
Acceptance by associates					
Sense of humor					

PLEASE GIVE YOUR CONFIDENTIAL EVALUATION OF THE APPLICANT

1. How long have you known the applicant?

2. How well do you know the applicant?
_____Casually _____Fairly well (numerous contacts) _____Close friend

3. Has this teacher or staff member ever been dismissed or requested to resign a position?

4. From your observations, at what grade level is this teacher most effective in classroom instruction?

5. Does this teacher or staff member give clear evidence of personal commitment to the Christian faith?

6. Why did applicant leave your school system or business?

7. Would you desire the applicant to be the teacher or staff member of your own children?

8. Please mention any specific weakness, whether, of a personal or professional nature, that should be brought to our attention:

9. Please mention any specific strength that would be a valuable addition to our school:

PLEASE GIVE US YOUR CONTACT INFORMATION

Your name: _____ Position: _____
Institution/Company: _____
Phone: _____ Date: _____

Thank you for your helpful feedback.

Please mail directly to:
Mr. Joel Satterly, Headmaster
Westminster Academy
5601 North Federal Highway
Fort Lauderdale, FL 33308