

UNIVERSITY OF NORTHERN COLORADO
Educational Leadership and Policy Studies

Professional Assessment Form: Administrator Licensure

Reference for: _____

TO THE APPLICANT: Indicate whether this reference is confidential or non-confidential by signature below.

_____ I WAIVE my right to inspect and review this reference; it will be confidential.

_____ I DO NOT WAIVE the right to inspect and review this reference, it will not be confidential.

TO THE REFERENCE: The above named individual is applying to the Master of Arts (M.A.) degree program in Educational Leadership. Please answer the questions below. Attach additional sheets if necessary.

1. How many years have you observed the applicant's professional experience, and in what capacity?

2. In what ways do you believe that the applicant has demonstrated his/her potential for educational leadership?

3. Describe any specific professional contributions of this individual.

4. What is your assessment of this applicant's ability to engage in graduate level study at the University? On what is this assessment based?
5. Please feel free to make any additional comments regarding this applicant's qualifications for pursuing the M.A. degree at the University of Northern Colorado.

Date: _____

Name: _____
(Print or Type)

Signature: _____

Title: _____

Address: _____

City: _____

Zip: _____ Phone: _____

Professional Relationship with applicant: _____

Please mail/return this form in the envelope provided to:

Educational Leadership and Policy Studies
Coordinator of Admissions
McKee Room 418 CB -103
University of Northern Colorado
Greeley, CO 80639-0044