

ANGELO STATE UNIVERSITY
 OFFICE OF RESIDENTIAL PROGRAMS
 EMPLOYMENT REFERENCE FORM: Program Assistant

Name and CID to be completed by the applicant:

Applicant's Name: _____ CID: _____
 First MI Last

The purpose of this form is to assist the Office of Residential Programs in evaluating applicants for the position of Program Assistant. Your candid evaluation of the applicant, based upon your experiences with him/her, serves as an important factor in the selection process. Thank you for taking the time to complete this form on the applicant's behalf.

Brief Position Description:

The Office of Residential Programs is looking for highly energetic and motivated students to serve as Program Assistants. These positions will assist and support a broad range of programming in the residence halls across campus. PA's will assist with the research, design, creation, coordination, marketing and implementation of programs based on community needs.

Students must be prepared to be a positive role-model for all campus residents. Students should be creative, flexible and be prepared to plan and attend various events and programs offered on campus. Students should also be able to motivate and encourage residents to attend various events on campus.

How long have you known the applicant?

- 0 – 6 months 6 – 12 months 1 – 5 yrs Over 5 yrs.

In what capacity have you known the applicant?

Please answer the questions below based on the following scale:

Always 5	4	Sometimes 3	2	Never 1	Unable to Rate
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Questions:	Rating	Comments:
Is the applicant tactful in manner?		
Does the applicant use good judgment in making decisions?		
Is the applicant dependable?		

Can the applicant accept and give constructive criticism?		
Do you think the applicant has insight into the interests and needs of other people?		
Is the applicant capable of initiating conversation?		
Does the applicant seem comfortable asking clarifying questions or for assistance?		
Is the applicant confident?		
Is the applicant friendly?		
Is the applicant trustworthy?		

Would you hire this person for a similar position?

- Highly recommend
 Recommend
 Do not recommend.
- Recommend with some reservations (Please comment below.)

Signature _____

Printed name of reference: _____ Date: _____

Position or Title (if applicable): _____

Please return this form as soon as possible to:

Office of Residential Programs
Program Assistant Reference
ASU Station #11016
San Angelo, Texas 76909

The information you have supplied on this form is maintained by the University. You have the right to review and correct this information by contacting the Office of Residential Programs.