The following student is applying to the major of the B.S.ED. program in Early or Middle Childhood Education leading to teacher licensure in the State of Ohio. Please answer the following questions based on your experiences and interactions with this student in and outside of the classroom. Thank you.

Student Name_________________________________________ Major_________________________________________

1. What skills have you seen this person demonstrate that might indicate s/he could become a good teacher of children?

Please circle your responses to the following:

2. This student works well in group projects. Group project skills include listening respectfully to others’ ideas, doing a fair share of the work, completing work in a timely manner, and submitting high-quality work.

   Strongly Agree (5)   Agree (4)   Neutral (3)   Disagree (2)   Strongly Disagree (1)

3. This student demonstrates an open-minded attitude and respect for diversity. (The concept of diversity encompasses acceptance and respect. It means understanding that each individual is unique, and recognizing our individual differences. These can be along the dimensions of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs, or other ideologies.)

   Strongly Agree (5)   Agree (4)   Neutral (3)   Disagree (2)   Strongly Disagree (1)

4. This student demonstrates good interpersonal skills with fellow students.

   Strongly Agree (5)   Agree (4)   Neutral (3)   Disagree (2)   Strongly Disagree (1)
5. This student demonstrates good interpersonal skills with faculty:
   Strongly Agree (5)  Agree (4)  Neutral (3)  Disagree (2)  Strongly Disagree (1)

6. This student demonstrates a level of professionalism and maturity appropriate for teaching a class of elementary or middle school students.
   Strongly Agree (5)  Agree (4)  Neutral (3)  Disagree (2)  Strongly Disagree (1)

Is there anything else you wish to share about this applicant?

Faculty Name___________________________________________________________

Department____________________________________________________________________

Course this student took with you ______________________________________________

Signature_____________________________ Date _________________________________

Please return completed form to Amy Langhals: Faculty Services GA428 by 5:00 p.m. March 1, 2016.