RECOMMENDATION IN SUPPORT OF APPLICATION FOR
ADMISSION TO FAMILY AND HUMAN SERVICES-EARLY CHILDHOOD EMPHASIS MAJOR

SECTION I TO BE COMPLETED BY APPLICANT:

This recommendation will become part of your admissions file. It will be used only for admissions considerations and will not be disclosed to any unauthorized individual without your consent. Under the federal law entitled the Family Educational Rights and Privacy Act of 1974 and the UO Student Record Policy, registered students are given the right to inspect their records, including letters of recommendation. Should you wish to waive your right of access to this recommendation, you may do so by checking the appropriate box below. All recommendations will be carefully considered. Check one of the following responses:

☐ I waive access to this recommendation.

☐ I do not waive access to this recommendation.

Signature_____________________________________________Date___________

SECTION II TO BE COMPLETED BY PERSON PROVIDING RECOMMENDATION:

Your name has been given as a reference by ____________________________, who is applying for admission to the University of Oregon's Family and Human Services Major. As required by the Family Educational Rights and Privacy Act of 1974 and the University of Oregon Student Record Policy, a student may either elect to waive or not to waive the privilege of viewing this recommendation. If the student has indicated that he/she will not have access to this recommendation, please place this form and your letter in a sealed envelope with your signature across the seal and return the recommendation to the applicant.

1. How long have you known the applicant? ________________________________

2. What is/was your relation to the applicant?
   ☐ Employer/Supervisor ☐ Co-worker ☐ Other: ____________________________

3. Please rate the applicant relative to other employees whom you have known in the same field in recent years by placing an “x” in the column that best reflects your experience with the applicant.

<table>
<thead>
<tr>
<th>Ability/Characteristic</th>
<th>Not Observed</th>
<th>Exceptional</th>
<th>Average</th>
<th>Poor</th>
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<tbody>
<tr>
<td>Intellectual Potential</td>
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<td>Initiative and Follow-through</td>
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<td>Oral Communication Skills</td>
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<td>Written Communication Skills</td>
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<td>Interpersonal Skills</td>
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<td>Respect for Diverse Populations</td>
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<td>Self-awareness</td>
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<td>Creativity</td>
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<td>Ethical Professional Behavior</td>
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4. Please describe the setting(s) in which you have observed and interacted with the applicant that form the basis of your evaluation above.

________________________________________________________________________

________________________________________________________________________

5. Please attach a short letter describing the applicant’s potential for successful professional practice with children, youth, families, and communities. Specific examples are helpful. In addition, please describe the applicant’s areas for growth.
   • Additionally, if you are an employer, please address how you will support the student as they progress through the FHS-ECE program (i.e. flexible time, resources, etc.)

6. Are you aware of any reason why this individual may not be successful in an academic program, or might pose a risk to vulnerable people (if yes, please address these reasons in your letter)?
   □ No □ Yes

7. Summary Evaluation (please check only one)
   □ I strongly recommend this applicant for admission and believe that he/she has the capability to perform at a superior level.
   □ I recommend this applicant for admission and believe his/her performance will be comparable to that of most upper division students.
   □ I think that the applicant’s qualifications are marginal, but if admitted, the applicant would greatly benefit from study in this program.
   □ I do not recommend this applicant for admission to the Family and Human Services-Early Childhood Emphasis Program

Name (print) _____________________________ Date _______________________

Position or Title ___________________________ at ________________________________

Signature _________________________________

Phone/Email ________________________________

Please return this form and your letter directly to the applicant in a sealed envelope.