Sugar Hill Christian Academy Employment Reference Form

Name of ApplicantPosition Applied For					
Applicant's waiver of right to access confi information contained on this recommendation					
Signature of Applicant	_		Date		
The person whose name appears above ha give us your opinion of this applicant's pe access to education records, including record you for your assistance in providing this as	rsonal and profess ommendations, un	ional qualif	ications. Fede	ral legislatio	on gives the applicant
RECOMMENI	DATION APPRAI FOR THE A			QUALITIE	S
Performance Area	Not observed	Lower 25% Poor	Middle 50% Average	Top 20% Good	Top 5% Superior
WORK HABITS					
Attendance					
Punctuality					
Follow instructions					
Observation of work rules					
Vork ethic					
TTITUDE					
Vorks well with others					
hows initiative					
elf confidence					
xhibits tact and self control					
attitude toward customers/clients					
ERFORMANCE AND PRODUCTION					
Quality of work					
Knowledge of content					
eaching practices					
Discipline strategies					
earns new skills easily					
hows good judgment					
romptness, neatness and accuracy with reports					
nd records					
Printed name of person completing					
Address	P	hone			
Signature	Title_			Date _	
Relationship to Applicant:					
Supervisorcoworker _					
What was the applicant's position v					
How long did you supervise or wor	k with this app	licant?			
Would you feel comfortable with the YesNo	nis applicant wo	orking arc	ound or near	your child	d or other children
105110			Yes		

Please do not return this form to the applicant. Return completed form to the attention of: Kristi Burlison

Principal Sugar Hill Christian Academy 4600 Nelson Brogdon Blvd., Sugar Hill, GA 30518 phone 678-745-4121