
Reference Form
**Doctor of Education in Curriculum and Instruction/
STEM Focus, College of Education**
University of Houston-Clear Lake

Name of Applicant _____
(Type or print) Last Name First Name Middle Name

To The Applicant: This form will be used in the admissions process and, therefore, must be included with your application materials. This form must be signed by the evaluator and sealed in an envelope with the evaluator's signature and the date written across the sealed flap. Reference Forms that are open or unsealed do not satisfy the requirement for confidential recommendation. This form must be accessible to you if you enroll in the program (see the Family Educational Rights and Privacy Act of 1974). We request, but do not require, that you waive your right of access in order to facilitate a completely candid appraisal. If you choose to waive your right of access, please sign immediately below.

SIGNATURE OF APPLICANT _____

To The Evaluator: We solicit your candid appraisal of this applicant. However, you should be aware that if the applicant's signature does not appear above, and if he or she enters the program, the applicant could ask to review the information you provided.

In order to expedite processing of the many applications received by the program each year, we require applicants to enclose the Reference Forms as part of their application materials for admission. *The form must be signed by the evaluator and sealed in an envelope with the evaluator's signature and the date written across the sealed flap.* Please feel free to use another page if you need additional space.

We feel a deep sense of responsibility to the public and to the education profession to be reasonably certain that our students are academically well qualified, that they possess a reputation for truth and honesty, and that they have the commitment to successfully complete the rigorous program of doctoral study. Therefore, we rely, in part, on the information you give us in making the final admission decision.

Please know that we are exceedingly grateful for your assistance in evaluating this applicant.

How long have you known this applicant? _____

In what capacity? _____

Do you believe that the applicant has the necessary ability to complete a rigorous program of doctoral studies in Educational Leadership?

decidedly

probably

doubtfully

no

Comments: Please use this space to comment on your additional perceptions of this applicant. Particularly helpful to the Admissions Subcommittee are observations on the applicant's leadership experience and leadership potential as well as the ability to understand difficult problems, use imaginative thinking in approaching problems, ability to reconcile diverse points of view, and apply common sense to the solution of problems. Additional comments are welcome, of course.

Name of reference _____ Title _____
(Type or print)

Organization/Institution _____ Phone _____
(Include Area Code)

Address _____
Street City State Zip code

e-mail _____

Signature of Reference _____ Date _____

Return directly to the applicant in a sealed envelope, which you have signed and dated across the sealed flap, to be included in her or his Application Portfolio.