

RESIDENT ADVISOR RECOMMENDATION FORM

APPLICANT NAME:								
The above-named student he purpose of this form is to as evaluation of the applicant, process. Please complete the resident students. The position dependability, and a willings	sist the s based up e form as ion requi	election oon your s comple res stro	commit experie etely and ng comm	tee in ev nce with honest nunication	valuating an him/her, ly as possilon skills, ti	pplicants for the RA serves as an importa ole. The RAs serve a	position. Your candid ant part of the selection s the first contact for our	
1. In what capacity and to	what deg	gree do v	you knov	w the ap	plicant?			
2. Please rate the applican (1=Below Average, 2=Average)			rage, 4=:	Superior	, NBJ=No B	Basis to Judge)		
Oral Communication	1	2	3	4	NBJ			
Written Communication	1	2	3	4	NBJ			
Time Management Skills	1	2	3	4	NBJ			
Maturity	1	2	3	4	NBJ			
Responsibility	1	2	3	4	NBJ			
Integrity	1	2	3	4	NBJ			
Work Ethic	1	2	3	4	NBJ			
Judgment	1	2	3	4	NBJ			
Initiative	1	2	3	4	NBJ			
Attitude	1	2	3	4	NBJ			
Team Participation	1	2	3	4	NBJ			
Leadership	1	2	3	4	NBJ			
3. OVERALL RATING FOR H								
Highly Recommend	endRecommend with R				ations	Recommend	Do not Recommend	
Please explain your rating:								
Print Name:				Posi	Position/Title:			
Email Address:					Phone:			
Signature:					Date:			

Please return this form to the Department of Residence Life:

Box 2416 SHSU Huntsville, TX 77341 Fax: 936-294-1920

Email: ResourceCenter@shsu.edu

By **February 16th** at 5:00 PM