Reference Report on Applicant for Admission to Educational Leadership Programs

Student ________________________________________

Address ________________________________________

Department of Educational Leadership
Wichita State University, Campus Box 142
Wichita, KS 67260-0142

Degree for which the student is applying: Doctoral Degree

I ☐ do ☐ do not waive my right to see this report ______________________________________________________

Signature of Applicant

Respondent _______________________________
Address ________________________________

Name ______________________________________

Title ________________________________

For how long have you known the applicant? ________________________________

In what capacities have you known the applicant? ______________________________________________________

The Admissions Committee would appreciate your professional estimate of the applicant’s personality, aptitude for advanced graduate study, and future career potential. Please check the appropriate box below.

<table>
<thead>
<tr>
<th>Qualities</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Superior</th>
<th>Truly Exceptional</th>
<th>Inadequate Opportunity To Observe</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lowest 40%</td>
<td>Middle 20%</td>
<td>Next 15%</td>
<td>Next Highest 15%</td>
<td>Highest 10%</td>
<td></td>
</tr>
</tbody>
</table>

If you had the opportunity, would you hire this candidate for a position in educational administration? ☐ Yes ☐ No

Date ________________________________

Signature of Respondent ______________________________________

Please use reverse for any other comments you want to make.

WHEN COMPLETED, PLEASE RETURN TO THE DEPARTMENT ADDRESS IN THE BOX ABOVE

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