

Southern Ohio Educational Service Center

CONFIDENTIAL ADMINISTRATIVE REFERENCE FORM

Adams County/Ohio Valley Local Superintendent

Instructions to Applicant: Please distribute confidential reference forms to three individuals who are familiar with your professional work.

WAIVER STATEMENT

I, the undersigned applicant, authorize the reference listed here to complete this reference form completely and confidentially. I specifically waive any right I might have to review this information.

Signature of Applicant: _____

INSTRUCTIONS TO PERSON COMPLETING THIS REFERENCE FORM: Please complete this reference form candidly and promptly, and send it directly to the Southern Ohio Educational Service Center to arrive not later than **March 17th**. All responses will be held in strict confidence.

1. Name and position of person writing this reference

Name _____ Position _____

2. How long have you known the candidate? _____

3. What was your role during this time? _____

4. Please rate the candidate using a 10-point scale:

1,2-Unsatisfactory 3,4-Adequate 5,6-Average 7,8-Above Average 9,10-Superior

A. Professional competency _____ L. Instructional program development _____

B. Knowledge of school finance _____ M. Goal setting & accomplishment _____

C. Common Sense _____ N. Integrity _____

D. Ability to get along with staff and community _____ O. Community involvement _____

E. Curriculum development _____ P. Communication skills _____

F. Ability to supervise, motivate and evaluate personnel _____ Q. Management skills _____

G. Available/accessibility _____ R. Decision-making skills _____

H. Willingness to put in extra time _____ S. Ability to deal with adverse situations _____

I. Knowledge of collective bargaining _____ T. Knowledge of legislative and legal matters _____

J. Public relation skills _____ U. Knowledge of school building construction programs _____

K. Resourcefulness _____ V. Respect and Caring for Others _____

5. Please comment on any of the above items that you feel are especially significant:

6. Please comment on this candidate's possibilities of success in the position he/she is seeking. Please indicate areas of strengths/weaknesses.

7. Do you know of any reason(s) we should not consider this candidate for this position?

8. If you were a board of education member, would you vote to employ this candidate?

Signature Title

Address

Telephone Date

Return this form directly to:

**Superintendent Search
c/o Tony Long, Superintendent
Southern Ohio ESC
3321 Airborne Road
Wilmington, Ohio 45177**