

_____ is applying for a School Social Worker position in the Baltimore County Public School System. Please evaluate him/her in comparison with others you have known in a like position. Your reactions to the items below will assist us in appraising qualifications and determining possible placement.

PROFESSIONAL RELATIONSHIP						
	From		To		Length	
	Month	Year	Month	Year	Years	Months
Student Teacher under my Supervision _____						
Teacher under my Supervision _____	Subject(s) taught and/or other assignments:					
Other _____						

If former employee, please state reason for leaving:

GUIDANCE QUALIFICATION/CHARACTERISTICS	YES	SOMETIMES	NO	UNDECIDED
Meets others with graciousness and ease				
Exhibits tact in difficult situations				
Accepts different methods of accomplishing a goal				
Shows strong evidence of leadership qualities with:				
<u>Students</u>				
<u>Parents</u>				
<u>Administrators</u>				
<u>Other Staff Members</u>				
Has initiated new ideas or concepts in achieving a comprehensive program of education/guidance services				
Is competent and could implement new developments in the guidance area				
Is conscientious and dependable				
Has demonstrated mature judgment and a high degree of professionalism				
Is well liked by the student body who seeks this person's assistance willingly				
Organizes plans for implementing the educational/guidance program on both a long range and a daily basis				
Has shown evidence of a willingness to continue an educational program that will keep one well informed and currently informed				

HOW WOULD YOU EVALUATE THIS PERSON AS A FELLOW/PROSPECTIVE STAFF MEMBER?

_____ an acceptable staff member
_____ a desirable staff member

_____ a most desirable staff member
_____ not desired as a staff member

Do others accept this person's assistance willingly and frequently in helping to understand and change student behavior? Yes _____ No _____

Would you accept this person without hesitation as a member of your school staff? Yes _____ No _____

Your counseling staff? Yes _____ No _____

Has there been any situation or time when you might have hesitated to accept this person as a member of your staff? Yes _____ No _____

If so, explain:

PLEASE COMMENT AS NECESSARY BELOW TO COMPLETE YOUR EVALUATION

Your signature

Title/Position

Date

Print name

Contact number

School, College or District

City and State