

TEACHER APPLICANT REFERENCE

Social Security # _____

Baltimore County Public Schools
 Department of Human Resources
 6901 Charles Street
 Towson, Maryland 21204

_____ has applied for a _____ position
 (subject area)
 with the Baltimore County Public Schools.
 Please evaluate this candidate in comparison to
 others you have known in a like position. It is
 very important to the candidate for this
 particular form to be completed and returned
 to Baltimore County as soon as possible.

Applicant's Dates of Service					
From		To		Length	
Month	Year	Month	Year	Years	Months

Subject(s) or Grade(s) taught: _____
 Student teacher under my supervision (___)
 Teacher under my supervision (___)

Other: _____

**THIS INFORMATION IS CONFIDENTIAL.
 IT WILL NOT BE SHARED WITH THE APPLICANT.**

Please check the appropriate boxes below:

QUALIFICATION CHARACTERISTICS	Outstanding	Very Good	Satisfactory	Marginal	Unsatisfactory
Plans and prepares work effectively					
Communicates effectively (Verbal and Written)					
Displays subject matter competency					
Utilizes a variety of teaching skills and methods					
Exercises appropriate pupil control and classroom management					
Works well with others; shows judgment and a willingness to assist					
Varies teaching to the ability levels of pupils					
Motivates pupils and establishes rapport					
Maintains health and emotional stability					
Fulfills responsibilities in a dependable manner					
Demonstrates commitment to teaching and a professional attitude					

What are her/his strengths? _____

In what areas does she/he need to improve? _____

In what capacity did you work with her/him? _____

If you were considering someone to teach your own child, or to teach in the school where you work, how would you recommend this candidate? Hire with enthusiasm ___ Hire ___ Hire with reservation ___ Do not hire ___

If this person was an employee, why did she/he leave? _____

 Name (Please Print.) Title Home Phone

 School or Business Name Work Phone Date

 School or Business Address Signature of Person Completing Form

Please provide, with appropriate attachments, any data that will substantiate or add to the above information. Narrative statements are encouraged.