## REFERENCE FORM FOR APPLICATIONS TO THE EDUCATIONAL LEADERSHIP DOCTORAL PROGRAM WESTERN ILLINOIS UNIVERSITY

## Applicant: \_\_\_\_\_

Date

NOTICE: Public Law 93-380, the Family Education Rights and Privacy Act of 1974 grants all students the right to inspect and review all of their official educational records. This right extends to letters of recommendation written on/after January 1, 1975, except that a student may waive his/her right to inspect and review letters of recommendation by signing a waiver.

WAIVER FORM:	I,	, the undersigned, hereby waive any right				
or privilege provided by Public Law 93-380 to inspect or challenge the content and comments expressed in this letter of						
recommendation. I expect that the observations made shall remain confidential between the writer and the person, agency						
or organization to whom any credential may be addressed.						

\_\_\_\_\_ Student's Signature

## To Whom It May Concern:

This person has applied for admission to the doctoral program in Educational Leadership at Western Illinois University. We would like your appraisal of the applicant's appropriateness to enter a doctoral program. Please make the following scale and also provide comment that you feel will further our understanding of this person's qualifications.

1. Emotional Self Awareness	4. Highly	<u>3.</u>	<u>2.</u>	1. Needs
(the ability to recognize and	Developed			Improvement
understands one's feelings and				
emotions)				
2. Self-Management (the				
ability to complete multiple				
tasks in a timely manner)				
3. Interpersonal Relationships				
(the ability to establish and				
maintain mutually satisfying				
relationships)				
4. Social Awareness (the				
ability to sense the emotions of				
others)				
5. Problem Solving (the ability				
to identify and define problems				
as well as to generate potential				
effective solutions)				
6. Emotional Self Control (the				
ability to keep disruptive				
emotions and impulses under				
control)				

7. Please provide your insights and knowledge of the applicant's academic and professional aptitude, their ability to complete advanced graduate work, and their ability to participate in research. If you have additional comments, please use an additional sheet of paper.

Return form to:	Admissions Secretary	Signature:
	Department of Educational	Position:
	Leadership	Address:
	Western Illinois University	
	81 Horrabin Hall	Telephone: ( )
	Macomb, IL 61455	-