CONNECTICUT COLLEGE
HOLLERAN CENTER FOR COMMUNITY ACTION AND PUBLIC POLICY
CERTIFICATE PROGRAM IN COMMUNITY ACTION AND PUBLIC POLICY - PICA

COMMUNITY MEMBER RECOMMENDATION FORM

Depending upon the student’s waiver, this recommendation may be returned to the student or may be forwarded to Rebecca McCue, Holleran Center Associate Director, Connecticut College Box 5277, 270 Mohegan Ave, New London, CT 06320; fax: 860-439-5408; e-mail: ramcc@conncoll.edu

To Be Completed by the Student:

Student's Name ___________________________ Box ________ Phone _________

I _____ waive or _____ do not waive my right to request to see this letter of recommendation.

Signed, ___________________________________ (student signature) ________ (date)

1. How long and in what capacities have you known the applicant?

2. Please comment on the student’s performance and potential:

3. Assessment of Personal Qualities: Please circle your answer.

Maturity
Passion/interest in social justice
Attitude towards Diversity
Leadership/initiative
Ability to work positively in groups
Motivation

Fair    Good    Very Good    Superior    N/A
Fair    Good    Very Good    Superior    N/A
Fair    Good    Very Good    Superior    N/A
Fair    Good    Very Good    Superior    N/A
Fair    Good    Very Good    Superior    N/A
Fair    Good    Very Good    Superior    N/A

Additional comments on this student’s personal qualities:
4. PICA students receive a college-sponsored internship between their junior and senior years. They must research, locate and organize this internship during the academic year. They then work with a community organization throughout the summer, returning to conduct an independent study or honors study on a related topic. Please comment on this student’s ability to work independently. Please circle your answer.

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<td>Ability to work independently</td>
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<td>Organization/work habits</td>
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5. Additional Comments about this student:

6. I hereby:

______ Strongly Recommend
______ Recommend
______ Do Not Recommend this student for the Certificate Program in Community Action and Public Policy/PICA

Recommender's Signature: _______________________________________

Recommender’s Name (Please print): _____________________________

Address: _________________________________________________

Phone:___________________________________________________

E-mail: _________________________________________________