

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	Fair	Good	Very Good	Superior	N/A
Passion/interest in social justice	Fair	Good	Very Good	Superior	N/A
Attitude towards Diversity	Fair	Good	Very Good	Superior	N/A
Leadership/initiative	Fair	Good	Very Good	Superior	N/A
Ability to work positively in groups	Fair	Good	Very Good	Superior	N/A
Motivation	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.

Ability to work independently	Fair	Good	Very Good	Superior	N/A
Organization/work habits	Fair	Good	Very Good	Superior	N/A
Dependability	Fair	Good	Very Good	Superior	N/A
Self-reliance	Fair	Good	Very Good	Superior	N/A
Adaptability	Fair	Good	Very Good	Superior	N/A

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: _____