

TO THE APPLICANT:

Please complete this section before presenting this form to your referee. Referees should be selected with care. References from friends and relatives are not acceptable. Both referees should have directly observed your interactions with groups of school-aged children.

Name of applicant (Last name <u>underlined</u> , then given names)	
Address	Phone number (with area code)
	Postal code

TO THE REFEREE:

This applicant is seeking admission to the Teacher Education Program at the University of the Fraser Valley. Applicants to the Teacher Education Program are required to have two letters of reference submitted before they will be considered for admission. Please answer the questions below and on the reverse side. Return the form **directly** in a sealed envelope to the address given below. A letter may be submitted in lieu of completing the back page of this form. However, please answer questions 1–6 in your letter. It is the policy of UFV to **treat as confidential** any reference reports or letters of reference which UFV receives as part of an applicant's admission documents.

Name of referee (please print or type)	
Organization	Position
Address (optional)	Phone (optional)

Referee, please forward both pages of this reference form to:

Admissions and Records Office
 Teacher Education Program Admissions
 University of the Fraser Valley
 33844 King Road
 Abbotsford BC V2S 7M8



Please provide **detailed** responses to the questions below to assist the UFV Teacher Education Program in our evaluation of the applicant.

<p>1. In what capacity and for how long have you known the applicant?</p>
<p>2. Describe the nature of the work you observed the applicant perform and indicate how long the applicant worked in this situation.</p>
<p>3. What four major strengths of the applicant will be most helpful as a future teacher?</p>
<p>4. What feedback did you provide to the applicant during his/her time with you?</p>
<p>5. Based on your knowledge of the applicant, suggest ways that our Teacher Education Program can support her/him during the professional year.</p>
<p>6. Please provide any information as to why this applicant should <u>not</u> become a teacher.</p>
<p>7. Please rank the applicant on his or her suitability as a future teacher.</p> <p><input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Good <input type="checkbox"/> OK <input type="checkbox"/> Poor</p>

Date
Signature

Because original signatures are required, this form may not be submitted by facsimile.

Delay in receipt of this information will result in delay in the processing of the application.