## CONFIDENTIAL RECOMMENDATION FORM Confidential Employee Position

## **Applicant** Please complete this section.

Position Applied for:						
Name				W. D. V. S. J.		
AddressStreet	First			Middle Initial		
		City		State	Zip	
Work Phone H			Cell Ph	one		
<b>Please read the statement below and sign where indicated.</b> I release from liability all persons and organizations reporting information requested by this Confidential Recommendation Form.						
Applicant's Signature Chula Vista Elementary School District – Confidential	Date					
Ondia vista Liementary School District - Comidential						
The person named above is applying for a confidential employee position in the Chula Vista Elementary School District. We are interested in your assessment of this applicant. Please complete this form and return it along with any attachments directly to the address listed below. Thank you and be assured that all information will remain confidential.						
1. How long have you known the applicant? From: To: To:						
2. In what capacity have you known this applicant:						
3. Based on your experience, please evaluate the applicant in each of the areas below:  Needs Unable to						
	Exceptional	Excellent	Acceptable	Needs Improvement	Judge	
Leadership						
Decision Making						
Problem Solving						
Organization						
Written Communication						
Verbal Communication						
Interpersonal Relationships with Others						
Cultural, Socio-Economic and Ethnicity						
Attitude, Initiative, and Cooperation						
Additional Comments:						
					ļ	
Signature		Name (Please Print or Type)				
Position or Title		Company				
Address						
Telephone Number		Date				
Chula Vista Elementary School District ● Human Resources ● 84 East "J" Street ● Chula Vista ● CA 91910						