

Secondary Apartment Coordinator Professional Reference Form

Please return this reference form to the Department of Housing Services, AC Search Committee, Washington State University, Streit-Perham Office Suite, PO Box 641726, Pullman, WA 99164-1726, **BEFORE 4:00 PM on Friday, January 22nd, 2021**. Facsimiles may be received at (509) 335-2148, directed to Anya Guadamuz or emailed to columbia.ac@wsu.edu. All reference forms, **including those that are mailed**, must be received by the aforementioned date and time to be considered.

If the applicant would like to deliver this reference form in person to the Housing Services Office, then the reference needs to place this form in a sealed envelope. Also, the reference needs to personally sign the seal of the envelope to ensure its validity. If the envelope seal is not signed, the reference will not be considered, resulting in an incomplete application for the candidate.

REFERENCE FOR: _____
Candidate's Name (Please Print)

Candidate Waiver

The Family Education Rights Act of 1974 gives students the right to inspect and review their confidential folders unless that right is waived. In accordance with the law, all candidates must indicate where they DO or DO NOT voluntarily waive (relinquish) their rights to ever view confidential letters or recommendations that are part of the application process. This choice will not affect one's candidacy in any way. The waiver pertains only to your right to review your application file after the hiring process is concluded. Please read the following statement below carefully and check the appropriate line.

I have read the above statement and:

To the Evaluator: If the candidate has signed the following statement, he/she may not review this document and its contents will be kept confidential.

To the Candidate:

→ I hereby waive the right of access to my confidential file. (You can have the Assistant Director of Housing Services review your folder with you, but you will not be permitted to personally view confidential letters of recommendation). The documents included in my file and information will remain CONFIDENTIAL.

→ I do not waive the right to access my confidential file. (You are permitted to personally view your entire file in the presence of a staff member of Housing Services- Apartments).

Signature of Candidate

Date

Information

This Candidate is in the process of applying for a job as an Apartment Coordinator. If hired, this candidate would work in an apartment complex of approximately 100 apartments with responsibilities that include assisting students with personal/academic problems, supporting University and Housing policies, working with residents to improve relationships with other residents, etc. This position is demanding of both time and energy.

Reference Writer Information

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Organization: _____

Official Position: _____

How long have you known the candidate? _____

In what capacity have you known the candidate? _____

Reference

Please evaluate this candidate in terms of the performance you have directly observed. Place a check (☐) in the appropriate box.

	Excellent	Above Average	Average	Below Average	Poor	No Judgment
Leadership Abilities						
Responsibility/Dependability						
Administrative Skills						
Ability to relate to people						
Ability to work with a wide range of people						
Enthusiasm/Initiative						
Response to criticism						
Communication Skills						
Emotional Maturity						

Other Information

Please offer a general assessment and recommendation concerning this candidate. In what capacity have you known this candidate? As well as further explanations regarding your answers in the table above. Please feel free to add an additional page if necessary. Thank you.

Note: Current laws prohibit any reference to race, creed, color, national origin, and mental/physical handicap.

To be filled in by reference writer:

Signature

Date

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