University of Hawai‘i at Hilo Student Activities Council
Reference Form

Please print or type legibly.

If you have any questions, please contact the Student Activities Council at (808) 974-7518, uhhsac@hawaii.edu, or stop by the SAC office in Campus Center 307. You can also contact the Campus Center Director at (808) 974-7499 or in Campus Center 210.

TO BE COMPLETED BY APPLICANT:
Applicant’s Name: ___________________________________ UHH ID#: __________________
Last  First  MI
Position Applying For:  □ Executive Chair  □ Sr. Event Planner / Vice Chair  □ Business Manager
□ Secretary  □ Event Planner  □ Publicist
Name of Person Completing Reference Form: ____________________________________________
Title: ______________________________________________________________________________
Company/Department: __________________________________________________________________
E-mail: ___________________________ Phone: ___________________________

I DO ____  DO NOT _____ WAIVE MY RIGHTS TO ACCESS THIS FORM.
Signature of Applicant: ______________________________________________________________

TO BE COMPLETED BY EVALUATOR:
In what capacity and what length of time did you work with the applicant?

Support Statement
Please write a short recommendation citing specific anecdotal evidence to support this applicant’s appropriateness for this position.
Please indicate to what degree the above applicant possesses the following skills and qualities by checking the appropriate box by using the scale below.

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<th>Skill/Quality</th>
<th>5 – Exceptional</th>
<th>4 – Above Average</th>
<th>3 – Satisfactory</th>
<th>2 – Below Satisfactory</th>
<th>1 – Poor</th>
<th>0 – No Chance to Observe / Unable to Judge</th>
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<td>Can lead or follow as needed</td>
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<td>Adapts to adverse situations or changing conditions</td>
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<td>Demonstrates positive attitude</td>
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<td>Completes tasks &amp; assignments w/ little supervision</td>
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<td>Communicates ideas &amp; opinions effectively</td>
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<td>Works well with others in multicultural setting</td>
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<td>Develops creative &amp; innovative programs &amp; activities</td>
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<td>Thinks clearly &amp; logically when problem solving</td>
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<td>Produces quality work</td>
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<td>Takes initiative to plan/implement ideas</td>
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<td>Is reliable and dependable</td>
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**Overall Recommendation**

- [ ] I recommend the applicant, without reservation, as an excellent choice for SAC.
- [ ] I recommend the applicant as a good choice for SAC.
- [ ] I have some reservations, but believe the applicant has a reasonable chance of success in SAC.
- [ ] I have substantial reservations about this applicant as a choice for SAC.
- [ ] I do not recommend this applicant for a position in SAC.

**Confidentiality Statement**

- [ ] I authorize the Campus Center to identify me as the source of reference and to allow the applicant to view this recommendation form.
- [ ] I do not authorize the Campus Center to identify me as the source of reference and do not authorize the applicant to view this recommendation.

__________________________________________________________  ____________
Signature of Recommender                                      Date