**UMBC**

**Teacher Education Scholarship Program**

**RECOMMENDATION FORM (DUE 5/9/22)**

**PART I: To be completed by the Scholarship Applicant**

Complete this section before sending the form to your recommender.

1. Applicant name (First, Middle, Last):

2. Applicant Email: 3. UMBC ID#:

**PART II: To be completed by the Recommender**

The UMBC Department of Education Scholarship Committee seeks your perspective on the applicant’s qualifications as a teacher candidate/teacher. ***Recommendations should not come from family members***.

1. Recommender’s Name & Title:

2. Organization/Affiliation:

3. Organization Address:

4. Telephone: 5. Email:

6. How long have you known the applicant and in what capacity?

7. Please give your assessment of the applicant on the following criteria.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Excel-lent** | **Above Avg.** | **Avg.** | **Below Avg.** | **Weak** | **Unable to assess** |
| Commitment to social justice & equity |  |  |  |  |  |  |
| Passion for learning & professional growth |  |  |  |  |  |  |
| Knowledge & skills related to teaching |  |  |  |  |  |  |
| Content area expertise |  |  |  |  |  |  |
| Collaboration/team building skills |  |  |  |  |  |  |
| Empathy  |  |  |  |  |  |  |
| Ability to work with diverse learners |  |  |  |  |  |  |
| Written expression |  |  |  |  |  |  |
| Oral expression |  |  |  |  |  |  |
| Leadership skills |  |  |  |  |  |  |
| Technology skills |  |  |  |  |  |  |
| Overall potential as a teacher |  |  |  |  |  |  |

**Signature: Date:**

Please email this form to edscholarship@umbc.edu with the subject line "Recommendation for [Student's Full Name]".