



*A Partnership of Education, Community and Business*

100 W. Monroe St., Port Washington, WI 53074 262-268-6074

**RECOMMENDATION FORM**

Date: \_\_\_\_\_ Student name: \_\_\_\_\_

Name/Title of person providing recommendation: \_\_\_\_\_

*Check the Apprenticeship Area for which this student is applying:*

- |                                       |                        |  |
|---------------------------------------|------------------------|--|
| Agriculture, Food & Natural Resources | Hospitality & Tourism  | Marketing                                      |
| Architecture & Construction           | Information Technology | Transportation, Distribution & Logistics       |
| Art, A/V Technology & Communications  | Manufacturing          | Science, Technology, Engineering & Math (STEM) |
| Finance                               | Health Science         |  |

*Please grade this student on each attribute below, based on your observations:*

Attribute	Excellent (top 10%)	Above Average	Average	Below Average	No Basis for Judgment
Academic performance					
Responsibility					
Attitude					
Effort					
Dependability					
Ability to work with others					
Problem-solving					
Technical / mechanical skills					

*Please add additional comments that you believe are important for an employer to know about this candidate in their application process to be an apprentice:*

Based on my previous experience with this applicant, I believe he/she possesses the basic skills and understanding needed to successfully participate in this apprenticeship.

Signature

Print Name

Subject taught if applicable

Phone: