

THE CHRISTIAN SCHOOL AT CASTLE HILLS

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INSTRUCTIONAL REFERENCE FORM FROM PREVIOUS OR CURRENT EMPLOYER

Applicant's Name: _____ Date: _____

I have filed my application for an instructional position at The Christian School at Castle Hills. I am applying for the following position:

I am requesting that you complete this confidential reference form and mail directly to The Christian School at Castle Hills.

OFFICIAL CONFIDENTIAL INFORMATION

	SUPERIOR	STRONG	AVERAGE	FAIR	POOR
ADEQUACY OF PROFESSIONAL TRAINING evidence of being up to date professionally					
INSTRUCTIONAL EFFECTIVENESS					
KNOWLEDGE OF SUBJECTS					
CLASSROOM MANAGEMENT					
RELATIONSHIP WITH STUDENTS					
PARENT COMMUNICATION					
TONE OF VOICE					
EMOTIONAL STABILITY					
ETHICS/INTEGRITY					
RESPONSIBILITIES OUTSIDE CLASS					
GENERAL HEALTH					

How long have you known the applicant? _____ In what capacity? _____

Has this applicant demonstrated a real commitment to Christian living both on and off campus? _____

Is he/she a strong role model for students? _____

List the applicant's instructional strengths. _____

Are there character or personality weaknesses that diminish this applicant's effectiveness as an effective teacher?

How would you rank this person as compared to others you have supervised?

☐ Top 5% ☐ Next 20% ☐ Middle 50% ☐ Low 25%

Would you employ the above applicant as a classroom instructor for the position for which he/she is applying? ☐ Yes ☐ No

COMMENTS: _____

NAME OF REFERENCE: _____ TITLE OR POSITION: _____

SCHOOL/ORGANIZATION: _____

CITY: _____ STATE: _____ EMAIL: _____

CELL PHONE: _____