

2012-2013 Recommendation

**Applicant’s name:**

**To the applicant**: Please select someone who can speak well for your capacity and potential as a servant leader (for example, a professor/teacher, advisor, your summer supervisor or another employer, or someone with whom you have volunteered), and ask each to complete and return one copy of this recommendation form. Be sure to fill in your name and your reference’s name where noted; indicate whether you waive your right of access to this recommendation; and provide your reference a stamped (if necessary), pre-addressed envelope with which to return the form to the Center for Servant Leadership, postmarked by Monday, August 13, 2012.

I hereby authorize (reference’s name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to complete this recommendation form.

**Authorization** (sign only one)**:**

Under the provision of the Family Education Rights and Privacy Act of 1974, **I waive my right of access** to this recommendation and understand that the information provided will be used only for the purpose for which it was prepared.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(applicant’s signature)

**[OR]**

**I retain my right of access** to this recommendation.

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(applicant’s signature)

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**To the reference:** The student named above is applying to participate in the Servant Leadership Program (SLP), sponsored by the Center for Servant Leadership at Gustavus Adolphus College. The SLP, a signature program of the Center, consists of three distinct yet collaborative groups that emphasize service and self-discovery through action and reflection. The SLP supports student engagement in community service and social action by providing a space to discover passions, deepen relationships, discern vocation, as well as implement service projects in the local community.  With a firm commitment to the principles of servant-leadership, the SLP champions those known as exceptional people, outstanding leaders, and faithful students.  Each group is supported by an annual stipend in addition to a professional development fund for materials and supporting community engagement.

Please take a few moments to offer some insight into this applicant’s capacity and potential as a servant-leader, by sharing with us your candid responses to the questions on the back side of this page. *Thank you so much for your help.*

Please return the completed form by August 13th, directly to:

The Center for Servant Leadership

c/o Lindsey Lugsch-Tehle

Gustavus Adolphus College

800 West College Ave.

St. Peter, MN 56082

e-mail: slp@gustavus.edu; fax 507-933-6337

Reference Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the space provided or, if you prefer, on a separate sheet, please offer your insights in response to the following questions, providing specific examples whenever possible.

1. How long and in what capacity have you known the applicant? In that time, what has struck you as some of her or his most outstanding qualities?
2. In what ways have you seen this applicant serve? In what ways have you seen this applicant lead?
3. Please comment on the applicant’s reliability, maturity, “attitude,” and readiness for deep personal reflection and growth. How would you describe the applicant’s capacity to build and sustain community with others?
4. What do you believe will be among the applicant’s most significant contributions to this program? What might be some of her or his biggest challenges or “growing edges”?
5. What else do you believe would be helpful for us to know?
6. Overall, rate the applicant:

1 2 3 4 5

Not Enthusiastically

Recommended Recommended

Your signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you kindly for your help.