

**TRINITY UNIVERSITY**  
One Trinity Place, San Antonio, Texas 78212-7200  
**DEPARTMENT OF EDUCATION**

**APPLICANT EVALUATION FORM**

*To be completed by applicant*

Applicant's Name:

Check Field of Study: Master's Degree Program in  School Psychology  Educational Administration

---

*To be completed by the evaluator*

Evaluators may hand-write their comments for a candidate or complete the fields below in Microsoft Word.

Evaluator's Full Name: \_\_\_\_\_ Degree: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Institution: \_\_\_\_\_  
Position: \_\_\_\_\_  
email address: \_\_\_\_\_

I have known him/her as:  an undergraduate  a graduate student  
 teaching assistant  research assistant  
 other

I have known him/her for the period of \_\_\_\_\_ years and/or \_\_\_\_\_ months.

I served as his/her:  research advisor  department chairperson  
 teacher in several classes  teacher in only one class  
 employer  major advisor

What do you feel the likelihood is that the applicant will be able to complete a clinically oriented graduate program in educational administration/school psychology that is both intellectually demanding and requires the demonstration of leadership skills?

Please rate this applicant in overall promise (Circle one or complete the check-box)

Below Average <input type="checkbox"/> 1	Average <input type="checkbox"/> 2	Somewhat above average <input type="checkbox"/> 3	Good <input type="checkbox"/> 4	Unusual <input type="checkbox"/> 5	Outstanding <input type="checkbox"/> 6	Truly exceptional <input type="checkbox"/> 7	Inadequate opportunity to observe <input type="checkbox"/>
---	------------------------------------	--	---------------------------------	------------------------------------	--	---	--

(OVER)

**Please write a few sentences assessing the applicant in the areas listed below. A discussion of both strengths and weaknesses is most helpful. A letter in lieu of this form is acceptable.**

**Intelligence:**

**Social skills/relations with peers:**

**Ability to handle personal problems/maturity:**

**Communication skills – both oral and written:**

**Receptivity to criticism/supervision:**

**Empathy or sensitivity toward others:**

**Reliability/Industriousness:**

**Leadership/organizational skills:**

**Thank you for your cooperation in helping us to assess the above applicant. Please return this form to:**

**Department of Education  
Trinity University  
One Trinity Place  
San Antonio, TX 78212-7200**

**We cannot guarantee the confidentiality of your responses.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

If you completed the evaluation electronically, please type your e-signature here:

*Date:*

*For reasons of security, please send any electronic evaluations directly to [smireles@trinity.edu](mailto:smireles@trinity.edu) from an email account displaying your full name.*