

has applied with the Florida Cooperative Extension Service for the position(s) of: (specify)

Your name was given as a reference and we would appreciate your opinion of this person's qualifications. Please complete this form and return to: Dana LeCuyer at <u>ifas-hr@ifas.ufl.edu</u> or fax to: (352) 392-3226 or mail to PO Box 110281 Gainesville, FL 32611-0281.

Sincerely,

# Dana LeCuyer

Faculty Recruitment and Hiring

# CORE COMPETENCIES-

# BEHAVIORS EXPECTED OF ALL EDUCATORS

Below is a list of some of the core competencies that are important in performing the duties of an Extension Agent. Please indicate your judgment of the applicant's qualifications by selecting the appropriate rating from the drop-down menu.

	Above		Below		
Excellent	Average	Average	Average	Poor	unknown
(Top 5%)	(Top 25%)	(50%)	(Lower 25%)	(Lower 5%)	1

# **PROFESSIONAL ORIENTATION**

#### Please select:

Honesty
Dependability
Integrity

### INITIATIVE/ORGANIZATION

#### Please select:

Self-discipline-determination to fulfill personal obligations

Punctuality

Ability to budget time

Patience

Enthusiasm

Positive attitude

Self-confidence

Good judgment-ability to evaluate situations and make the most appropriate decisions

### **TEAMWORK/LEADERSHIP**

Supervisory skills

Communication skills

Tact-sense of what to do or say to avoid offending others

Ability to work with a variety of audiences

An open-mind-willing to consider new or different ideas or opinions

Acceptance of criticism

#### **PROGRAM PLANNING, IMPLEMENTATION AND EVALUATION**

Teaching ability

Willingness to learn

Adaptability to change

Ability to recognize problems in time to take corrective action and handle a crisis when it occurs

Ability to set priorities

Resourcefulness - ability to find alternative solutions and innovative approaches

Writing Skills

# **GENERAL INFORMATION**

What particular strengths do you think the applicant would have in this position?

What particular weaknesses do you think the applicant would have in this position?

Please list additional comments you have that would help us make an evaluation of this applicant.

Describe the nature of your contacts and the capacity in which you have known this person.

	If you were in a position to do so, would you employ this applicant as an Extension Educator?					
	T YES	YES - with some reservations	NO			
Name:		Title:				
	(Please type or print name)					
E-mail:		Daytime Phone:	Date:			
	Name of Organization:					