

## REFERENCE LETTER FOR THE MUSIC EDUCATION CERTIFICATION PROGRAM

**Applicant Name:** \_\_\_\_\_

In accordance with the provisions of the Family Rights and Privacy Act, the following report is to be regarded as:

- Confidential:** I waive my right of review  
 **Non-Confidential:** I retain my right of review

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Evaluator Name:** \_\_\_\_\_

Position: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

How long have you worked with this applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

<b>Please rate the applicant's ability in the following areas</b>	<b>Top 10% Superior</b>	<b>Top 20% Outstanding</b>	<b>Top Third Above Average</b>	<b>Middle Third Average</b>	<b>Bottom Third</b>	<b>Unable to Judge</b>
Ability to understand and to apply subject matter pertaining to music and music education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applicant's written work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express thoughts verbally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to interact socially in a positive manner Professional attitudes and values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctual class attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-time completion of course assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of completed assignments in form and style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applicant's overall personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**REFERENCE LETTER FOR THE MUSIC EDUCATION CERTIFICATION PROGRAM, PAGE 2**

**Applicant Name:** \_\_\_\_\_

Please comment on whether you believe that the applicant would provide a positive and professional model as a musician and music educator:

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

Do you have any reservations regarding the applicant's ability to become an effective educator?

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

Overall comments:

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

Please mark one

- I strongly recommend the applicant
- I recommend the applicant
- I do not recommend the applicant
- I recommend the applicant with reservations.

My reservations are: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return the reference letter to the applicant, in a signed, sealed envelope, or mail directly to:

Director of Student Services  
Carnegie Mellon School of Music  
5000 Forbes Avenue  
Pittsburgh, PA 15213