Learning Assistance Center
Supplemental Instruction Program
Professional Reference Form

To the Applicant:
Applicant’s Name: ___________________________ Date: __________________

In compliance with federal law, the Family Education Rights and Privacy Act (FERPA), you have the right to review all university files and documents concerning you, including reference materials written about you. You are not required to waive your right to review letters of recommendation used for employment purposes by the Learning Assistance Center. However, keep in mind that evaluative/reference materials may carry more weight if you have waived access to the materials.

☐ Yes, I waive my right to access this form. (The student may not see the recommendation.)
☐ No, I DO NOT waive my right to access this form. (The student may see this recommendation.)

Signature _______________________________ Date __________________

To the Reference:
You have been asked to provide a recommendation for employment as a Supplemental Instruction (SI) Leader. The Supplemental Instruction (SI) program is an academic support program within the Learning Assistance Center targeted at improving successful completion of “historically difficult” courses by offering free, voluntary, out-of-class review sessions designed to integrate what to learn with how to learn.

The person named above has applied for a position with the Learning Assistance Center as an SI Leader. Your assessment of the applicant’s characteristics will enable us to evaluate whether this applicant meets program standards.

Name of Reference: ___________________________ Email address: ___________________________
Institution/Business: ___________________________ Telephone: ___________________________
How long and in what capacity have you known the applicant? ___________________________

Please write letters of support on letterhead whenever possible and be sure to include the applicant’s full name within the letter. The letter should address the student’s professional qualities which support his/her application for employment with the Learning Assistance Center, including but not limited to the following:

- Personal integrity
- Reliability
- Ability to relate to others
- Ethical conduct
- Motivation and initiative
- Ability to keep material confidential
- Cooperation and ability to work with groups
- Professionalism and maturity

(Signature of reference) (Date)

Thank you for taking the time to complete this reference form. You may return this form, and the accompanying letter of support, to the applicant in a sealed envelope, or you may send it directly to:

Daniel Dale, Learning Assistance Center, 2435 French Hall; ML: 0221; Fax: (513) 556-2888; Email: daniel.dale@uc.edu