



Recommendation Form for Adult Learners

Three (3) recommendations required

Applicant/Adult Learner Instructions:

- This section is to be completed by the applicant/adult learner.
- Fill out the bottom portion of each page with the applicant/adult learner name and email.
- Once the form below has been completed, provide each of the recommending persons with a copy of the form.
- The recommending person can then scan and email the completed recommendation to: admissions@gmeinstitute.org

Applicant Name: _____

Program (circle): Infant/Toddler Early Childhood Elementary I Elementary I & II

Name of person completing the recommendation: _____

Organization and Title of person completing the recommendation:

Organization: _____

Title: _____

Note: By signing below, the applicant/adult learner waives their rights under the Family Educational Rights and Privacy Act of 1974 to inspect this document.

Applicant/Adult Learner

Date

Applicant/Adult Learner Name

Applicant/Adult Learner email address



This section is to be completed by the recommending person.

Name of Recommending Person: _____

Institution or Organization: _____

Title: _____ Email: _____

Preferred Address: _____

Preferred phone number: _____

How long have you known the applicant/adult learner? _____

In what capacity have you known the applicant/adult learner? _____

Please answer the following questions regarding the applicant/adult learner:

1. This program requires a commitment of the applicant/adult learner's time to complete the necessary coursework. Please speak to the applicant/adult learner's work ethic.

Applicant/Adult Learner Name

Applicant/Adult Learner email address

2. At Global Montessori Educators Institute, we value the success of our adult learners. How committed is the candidate in completing this program?

Please rate the applicant/adult learner on the following characteristics, with 5 being outstanding and 1 being fair:

Academic performance:	5	4	3	2	1
Dependability	5	4	3	2	1
Motivation for program	5	4	3	2	1
Ability to work independently	5	4	3	2	1
English Skills					
Spoken	5	4	3	2	1
Written	5	4	3	2	1
Ability to cooperate with and support others	5	4	3	2	1
Problem solving skills	5	4	3	2	1
Experience with technology	5	4	3	2	1

Applicant/Adult Learner Name

Applicant/Adult Learner email address



Any additional information may be included in a letter of recommendation or attached to this document.

Recommending person signature

Date

Applicant/Adult Learner Name

Applicant/Adult Learner email address