

# UNIVERSITY OF ILLINOIS AT SPRINGFIELD

## Department of Educational Leadership

Educational Leadership Program  
One University Plaza, MS BRK  
377 Springfield, IL 62703-5407

### SUPERINTENDENT'S ENDORSEMENT

#### Letter of Reference

**PART A (To be completed by applicant.)** Please complete this section and do one of the following: 1) Email the partially completed form for completion by someone familiar with your education and abilities; or 2) Print the partially completed form and ask the person familiar with your education and abilities to fill it in and return it to the EDL office per instructions below. Thank you!

Applicant Full Name \_\_\_\_\_ Proposed  
Program of Study \_\_\_\_\_ Field of Specialization \_\_\_\_\_

(Optional) I hereby waive whatever rights of access I may have to this confidential recommendation as provided in the Family Educational Rights and Privacy Act.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**PART B (To be completed by the person writing the reference.)** When you are finished, please print the completed form and return it to the EDL office per instructions below. Thank you!

Please complete this section, stating your opinion of the applicant's ability to carry on advanced study and research, teaching potential, and capacity to pursue a successful career in his or her field. (Approximately 300 words - 2000 character limit.)

\_\_\_\_\_  
Reference's Signature

\_\_\_\_\_  
Date

Name \_\_\_\_\_  
Institution \_\_\_\_\_  
Location \_\_\_\_\_  
Pref Email \_\_\_\_\_

**Please Return This Form to the Following Address:**

University of Illinois at Springfield  
Department of Educational Leadership  
ATTN: Scott L. Day, Ed.D., Chair  
One University Plaza, MS BRK 377  
Springfield, IL 62703-5407

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