

# Missouri Music Educators Association Work Crew Technician Recommendation Form

*(To be completed by College Instructor)*

Student Name:

Name of College or University:

Year in School (please circle one):  Fr.  So.  Jr.  Sr.  Grad. Recommender’s Name:

Recommender’s e-mail:       Phone:

***Please complete the following to the best of your knowledge.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Abilities & Characteristics*** | ***Exceptional*** | ***Superior*** | ***Above Average*** | ***Average*** | ***Below Average*** |
| Responsible |  |  |  |  |  |
| Punctuality |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Reliable |  |  |  |  |  |
| Initiative |  |  |  |  |  |
| Ability to work with others |  |  |  |  |  |

# Additional Comments:

## Please indicate the strength of your overall recommendation:

Recommend most highly  Recommend  Recommend with reservations

Instructor E-Signature:       Date:

Email to: Brian Reeves

[conferencemgr@mmea.net](mailto:conferencemgr@mmea.net)