MSIP Recommendation Form 2014

Kentucky Department of Education
District Commitment

Minority Superintendent Internship Program (MSIP)

To be completed by a Colleague

Candidate's Name:	

To the Colleague:

The above-named individual is applying for the Internship indicated above. The internship program is designed to identify and prepare highly qualified and highly effective minority candidates as educational leaders poised to make successful transitions into superintendent positions for Kentucky school districts. Using this form, please assess the candidate's current and potential leadership capabilities.

The submission deadline for recommendation has been extended to January 24, 2014. Only the Program Selection Committee and staff will have access to the evaluation herein.

Please mail the completed recommendation to:

Audrey Proctor, MSIP Project Coordinator
Kentucky Department of Education
Division of Next-Generation Professionals
500 Mero Street, Frankfort, KY 40601

Name:			
Title:			
School/District:			
Address:	**City:**	**State:**	**Zip Code:**
Work Phone: ext.	**Fax Number:**		
E-Mail:	**Alt. Phone Number:**		
Length of time you have known the candidate:			
Capacity in which you know the candidate:			

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Please assess the candidate's abilities in the areas listed below:

	Exceptional	Above Average	Average	Unable to Determine
Providing Leadership in complex settings	☐	☐	☐	☐
Communication skills (oral and written)	☐	☐	☐	☐
Knowledge of education; the teaching and learning process	☐	☐	☐	☐
Openness to new ideas/approaches	☐	☐	☐	☐
Self-confidence	☐	☐	☐	☐
Managerial skills	☐	☐	☐	☐
Working with and relating to diverse populations	☐	☐	☐	☐

Do you think the candidate is ready to participate in the MSIP program.
☐ **YES** ☐ **NO Comments:**_____

What additional skills/professional experiences do you believe the candidate needs in order to move into a superintendent position?

Additional comments:

Signature of superintendent:	**Date:**