



NEW JERSEY ACADEMY FOR AQUATIC SCIENCES

RECOMMENDATION FORM

PART A (TO BE COMPLETED BY APPLICANT)

APPLICANT'S NAME: _____

HOME ADDRESS/ZIP: _____

PART B (TO BE COMPLETED BY REFERENCE)

DEAR REFERENCE:

The Applicant is applying for the Community and Urban Science Enrichment program (C.A.U.S.E.). This program provides training for him/her to become summer camp counselor, facilitators for in-house and outreach programs, and positive role-models at the New Jersey Academy for Aquatic Sciences. The Education Department welcomes any comments that you feel will help us make an appropriate decision regarding this applicant. Please respond only to those items you feel qualified to address based on your knowledge of/or relationship to the applicant.

ACADEMIC SKILLS: **POOR** **AVERAGE** **GOOD** **EXCELLENT**

- Overall academic ability
- Attitude about school
- Maturity in class
- Attendance
- Effort applied to studies

Please indicate your assessment of applicant's overall academic performance.

Over Please

SOCIAL SKILLS:

POOR

AVERAGE

GOOD

EXCELLENT

- Overall Maturity
- Ability to interact with peers
- Ability to interact with faculty
- Leadership potential

Please indicate your assessment of applicant's overall social skills.

Please add additional comments you feel would be helpful to the New Jersey Academy for Aquatic Sciences Education Department.

Signature _____

Name _____

Title/Position _____

Address _____

Telephone _____

Date _____

Please be sure to seal the form in an envelope and place your signature over the seal. Return to applicant or mail to attn: CAUSE Program, New Jersey Academy for Aquatic Sciences, 1 Riverside Drive, Camden, NJ 08103