

**Career Services and Placement**  
**UNIVERSITY OF SOUTHERN INDIANA**  
8600 University Boulevard ♦ Evansville, Indiana 47712  
812-464-1865

**Recommendation Form**

Registrant's Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

**Note to Reference:** In order to verify the authenticity of your remarks, letters of recommendation for teachers must be on this **buff-colored form or official letterhead from your organization**. Please be sure to include your contact information.

Please make a concise statement (typed/print) about the candidate, covering such qualities as scholarship, natural ability, sense of responsibility, ability to express thoughts clearly, judgment, tact, etc. We would prefer that you **mail this form directly to USI Career Services Office**, rather than give this original to the registrant. References **MUST** have your signature. This form is reproduced as you submit it; therefore, it is important that you **type/print on the front side** of this page.

---

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name (Typed/Print) \_\_\_\_\_ Title \_\_\_\_\_

School/Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_