



## IU 13 Substitute/Guest Teacher Training Reference Request

**TO:** \_\_\_\_\_  
(Individual Providing Reference Information)

**FROM:** \_\_\_\_\_  
(Name of Applicant – Please Type or Print Clearly)

**DATE:** \_\_\_\_\_

I have registered for the Substitute/Guest Teacher Training workshop through the Lancaster-Lebanon IU 13. I have included you as a reference on the employment application. If you have no reservations with providing a reference, please complete the attached Reference Check Form and forward to the following individual as soon as possible (deadlines listed below). *Please do not return the form to me.*

**Mail to: Susan Billy, M.Ed.**  
**Human Resources Generalist**  
**Lancaster-Lebanon IU 13**  
**1020 New Holland Ave**  
**Lancaster, PA 17601**

**OR**

**Fax: (717) 606-1996**

Thank you for your assistance.

<b><i>Upcoming Training Session</i></b>	<b><i>Reference Form/Registration Deadline</i></b>
Aug 30 – Sept 1, 2011	Friday, Aug 19, 2011
Nov 1- 3, 2011	Friday, Oct 21, 2011
May 21-23, 2012	Friday, May 11, 2012

## Lancaster-Lebanon Intermediate Unit 13

### Substitute/Guest Teacher Training Reference Form

Applicant's Name \_\_\_\_\_

Name of Reference \_\_\_\_\_

Title \_\_\_\_\_ Phone Number \_\_\_\_\_

1. What is your relationship to the applicant?
  
2. How long have you known the applicant?
  
3. On a scale of 1-5 with 5 being the highest, please rate the applicant in the following areas:

	1	2	3	4	5	Comments
Punctuality						
Initiative						
Self-Control						
Cooperative						
Loyalty						
Resourcefulness						
Reliability						
Integrity						
Understanding Children						
Communication Skills						
Adaptability						

4. Is there anything else that you would like to share regarding this applicant?

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