

## Academic Recommendation Form

PASADENA CITY COLLEGE  
OFFICE OF PSYCHOLOGICAL SERVICES  
1570 E. Colorado Blvd.  
Pasadena, CA 91106

Internship Year: 2018-2019

Dear Professor,

Please complete this form and mail it directly to us. It will help us in selecting the next intern class.

Name of intern applicant:

Name of academic institution:

Name of person completing this form:

In what capacity did you know the applicant?

A **1** indicates poor performance and a **5** indicates exceptional performance.

Reliability (arrives to class on time; minimum number of absences): 1 2 3 4 5  
Comments:

Overall academic skills: 1 2 3 4 5      Not observed  
(ability to absorb and integrate material; organization and planning; pays attention to detail)

Comments:

Strength of written skills: 1 2 3 4 5      Not observed

Strength of oral skills: 1 2 3 4 5      Not observed

Sense of humor: 1 2 3 4 5      Not observed

Gets along well with others in class: 1 2 3 4 5 Not observed

Comments:

Overall academic performance: Above expectations

Within expectations

Lower than expected

(gets assignments in on time, quality of oral and written work)

Comments:

Personal characteristics (e.g. energy, engaging, maturity):

Comments:

Professional appearance: 1 2 3 4 5

Comments:

Any special or unique qualities this applicant has?

Additional Comments:

Signature:

Date: