Doctor of Education (EdD) in Distance Education

Reference and Appraisal Form

Last Name of Applicant:	
First Name of Applicant:	
Date:	
Te	o the Person Providing the Reference:
Please complete and r	return this form via email to edd@athabascau.ca prior to the January 31 st deadline.
For q 1	uestions, please contact the EdD Program Administrator -800-788-9041 ext. 6278 or edd@athabascau.ca
Name of Referee:	
Title:	
Place of Employment:	
Telephone Number:	
Email Address:	
How long have you known the a	pplicant?
In what capacity do you know th	ne applicant?

Ability Rating: In comparison with others at a similar stage in career and/or academic development, how would you rate this applicant?

	Superior (top 5%)	Excellent (top 10%)	Good above average	Average	Below average	No basis for Judgment
Academic preparation						
Ability to conduct research						
Ability to work						
independently Teaching Ability						
Teaching Abinty						
Writing skills						
Oral communication						
and presentation skills						
Computer and technology skills						
Critical thinking and						
analytic ability						
Abilities in Distance study, communication						
and collaboration						
Ability to manage						
multiple tasks						
Overall Rating						
	C	.1 A 1 •1•4 T	.	1 11		
General Appraisal: In rated the applicant in th						
	is way. Refe	page, please c	eomment on the	or situations a	ability to suc	ceed in
rated the applicant in the	n a separate pearch. Please oncerning this apple cordance with the document are NO ogram Administrative.	page, please comment or considered to be	comment on the applicant the admissions proceedition and Protection of CONFIDENTIAL and	e applicant's a s preparation of Privacy Act, of the I may be viewed by	ability to suce and weaknes	ceed in sses.