

LETTER OF RECOMMENDATION

GENERAL INFORMATION

- Letters of Recommendation are considered a valuable asset in selecting NPS ProRangers.
- Provide current and accurate information. All information will remain confidential.
- Assess the applicant as indicated below.
- Return your recommendation to the applicant in a sealed envelope. The applicant will include the sealed recommendation in their application packet.
- Any additional information may also be submitted.
- For questions or concerns Billy Shott, (303) 969 – 2652

APPLICANT INFORMATION

Name _____
Last First Middle

Mailing address _____
Street City State Zip

REFERENCE INFORMATION

Name _____
Last First Middle

Mailing address _____
Street City State Zip

Daytime telephone number _____ Evening phone number _____
(###) ### - #### (###) ### - ####

Email Address _____

Relationship to applicant (please select one):
 Professional Educational Civic Ecclesiastical Friend Family Other (please specify) _____

APPLICANT ASSESSMENT

On a scale of 1 – 10 (1 = lacking, 10 = highly developed) please indicate your impression of the applicant.

Honesty/Integrity	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Work Ethic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Motivation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Reliability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Enthusiasm	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Potential	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
Leadership	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10

APPLICATION FOR NPS PRORANGER

2009-2011 Academic School Years

ProRanger Program

San Antonio College

Fletcher Administrative Center 202

1300 San Pedro Avenue,

San Antonio TX 78229-4299

(210) 486-1700; Email: ProRanger@nps.gov

Application Deadline: February 12, 2010

LETTER OF RECOMMENDATION

ADDITIONAL INFORMATION OR INPUT YOU FEEL IS IMPORTANT

APPLICANT RECOMMEND

Would you recommend this applicant for the NPS ProRanger Law Enforcement program?

Please recommend on a scale of 1 – 10 (1 = would not recommend, 10 = highly recommend)

1 2 3 4 5 6 7 8 9 10

SIGNATURE AND DATE

I certify the information provided on this recommendation is correct to the best of my knowledge and I authorize the release of this information to anyone or any institution involved in the ProRanger selection.

Signature _____ Date _____