

Faculty Recommendation Form

Students: Give this form to a SUNY Orange faculty member.

Student's Name: _____

Faculty: The above student has applied for a position as a Student Support Initiatives Peer Mentor. The Peer Mentors serve in a leadership role assist their mentees develop academic success skills such as time management, reading strategies and study skills. Mentors will receive weekly training on how to best support these students. Your input is an essential part of the application process as we strive to select the most qualified student leaders. Please provide a candid evaluation of this student's potential to serve effectively in this role. Thank you for your time.

After completing and signing the form, please scan and email to: alison.fisher@sunyorange.edu or via interoffice mail to Alison Fisher, Student Success Specialist, 125 Kaplan Hall, Newburgh Campus.

Please check the category that indicates your perception of this student in each area.

Fair Good Excellent No Opinion

1. Academic motivation

2. Responsibility

3. Written and Verbal communication skills

4. Initiative

5. Leadership skills

6. Interpersonal skills

How long have you known the student and in what capacity?

Do you have any concerns about this student's ability to mentor?

What is your overall assessment of the student's academic and professional fit for the mentor program?

If you would like to make additional comments about the applicant, please attach a separate sheet.

**Please feel free to contact Alison Fisher, Student Success Specialist, if you have any questions:
845-341-9650 or alison.fisher@sunyorange.edu.**

Faculty Name: _____ Dept: _____

Faculty Signature: _____ Date: _____

Phone: _____ Email: _____