



**CHILD, YOUTH, AND FAMILY STUDIES  
BACHELOR OF APPLIED SCIENCE APPLICATION FALL 2018**

**RECOMMENDATION FORM**

**Instructions to the Applicant:**

Fill out the following Applicant and Recommender Information then have your Recommender complete the rest of the form. The Recommender will return the completed form directly to the college (addresses at end). Any completed recommendations sent in by the Applicant will be void. Applicants will have a total of two Professional Recommenders; no friends or family. Please note: applications are not complete until Recommendation Forms are received.

**Instructions to the Recommender:**

The applicant listed below is applying for the Bachelor of Applied Science in Child, Youth, and Family Studies (CYFS) degree at Edmonds Community College. This is an interdisciplinary degree that combines Early Childhood Education and Social and Human Services. Admission into this program is competitive, and having your recommendation will assist the BAS-CYFS Admissions Committee with the selection process. Please complete this Recommendation Form and return to the CYFS department (deadlines and addresses at end).

**APPLICANT INFORMATION**

Last Name:	First Name:
Middle Name:	Birthdate:
Email:	Telephone Number:

According to the Family and Educational Rights and Privacy Act of 1974, as amended, students are guaranteed access to educational records concerning them, unless that right is waived. Waiving your rights is optional; however, you (Applicant) should check with the Recommender to ensure willingness to submit this form without the guarantee of confidentiality.

I hereby waive any rights to review this recommendation, and I give my permission for this recommendation to remain confidential between Edmonds Community College and the Recommender.

Electronic signature represents valid signature.

**Signature of Applicant:**

**Date:**

**RECOMMENDER INFORMATION**

Last Name:	First Name:
Organization:	Position/Title:
Email:	Telephone Number:

**Recommender: Please answer the following questions about the Applicant.**

<p>1. How do you know the applicant and for how long?</p>
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2. Provide an example of this applicant in the work place that shows their strengths and potential for working with children, youth, and families.

3. How would this program enhance this applicant's professional growth?

4. Additional recommendations or comments on the applicant.

**Please check the appropriate rating based on your evaluation of the applicant.**

Characteristics	Exceptional	Above Average	Average	Below Average	Well Below Average	No Basis for Judgment
Interpersonal skills						
Active listening skills						
Time management skills						
Teamwork skills						
Stress management skills						
Problem-solving skills						
Verbal communication skills						
Written communication skills						
Demonstrates ethical behavior						
Self-awareness						
Cultural competency						
Integrity						
Reliability						

Electronic signature represents valid signature.

<b>Signature of Recommender:</b>	<b>Date:</b>
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**Thank you for your recommendation.**

**Please either mail or email the completed Recommendation Form to the following addresses:**

**MAIL:**

Attn: BAS-CYFS Program Admissions  
Edmonds Community College  
20000 68<sup>th</sup> Ave. West  
Lynnwood, WA 98036

**EMAIL:**

cyfs@edcc.edu

**DEADLINES:**

Completed applications received between March 5, 2018 through May 21, 2018 will receive first consideration. Applications received after May 21, 2018 will be reviewed based on space availability.

If you have any questions, please call the Program Manager, Teresa Lin, at 425.640.1605 or email at [teresa.lin@edcc.edu](mailto:teresa.lin@edcc.edu).