Letter of Recommendation

Semester to begin work:  □ Spring  □ Summer  □ Fall  Year 20□□

To:  Instructor:_________________________ Department: ______________

From:  Elaine Avrus, Department Chair; Learning Assistance Center

The following student is applying for a position as a tutor in the Learning Assistance Center and has requested that you complete this recommendation letter. Thank you in advance for your assistance.

Student’s Name: ________________________________  CCSF ID # ______________________________

Course(s) requested to tutor: ________________________________

<table>
<thead>
<tr>
<th>The section below is to be completed by the instructor</th>
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<tbody>
<tr>
<td>Knowledge of Subject(s)</td>
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<tr>
<td>Friendliness and Enthusiasm</td>
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<tr>
<td>Communication and English Speaking Ability</td>
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<tr>
<td>Overall Class Performance</td>
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</tbody>
</table>

□ I fully recommend this student without reservation to tutor the following courses:
__________________________________________________________

□ I recommend this student to tutor, with reservations, the following courses:
__________________________________________________________

□ I am unable to recommend this student as a tutor at this time.
Comments: __________________________________________________

Instructor Signature  Office  e-mail  Date

RRJR/2016