



Kentucky Agricultural Leadership Program



Recommendation Form



Applicant's Last Name

Applicant's First Name

Middle Initial

To the Recommender:

You have been requested by an applicant for the Kentucky Agricultural Leadership Program to provide an assessment of their qualifications. This program seeks applicants who are, or who possess the ability to become leaders within agriculture, their communities, state, or nation. Your evaluation will be included as a part of the information on which we will base our admission decision. We would appreciate your candid evaluation of the applicant. Your comments will remain confidential with the Program's Selection Committee. Thank you for your time.

1. What is your name and your position title
2. How long and in what capacity have you known the applicant?
3. Use space below to evaluate the applicant's potential for becoming a leader in agriculture, the community/state/nation.

4. Using the table below, please give your assessment of the applicant's qualifications:

	Outstanding (top 10%)	Very Good (top 20%)	Good (top third)	Average (middle third)	Below Average (bottom third)	No Observation
Leadership						
Ability to work with others						
Self-confidence						
Gives time to community						
Exhibits interest in public issues						
Motivation and drive						
Personal integrity						
Oral communication skills						
Creativity and imagination						

4. Would you: _____ Strongly Recommend _____ Recommend
 _____ Recommend with reservations _____ Do not recommend

this applicant for admission to the Kentucky Agricultural Leadership Program.

My reservations are: _____

Name *Title or Position*

Address (include city and zip code) *Telephone*

Please return completed application form electronically by October 15, 2009 by clicking on the SUBMIT button below



or mail to:
 Kentucky Agricultural Leadership Program
 321 Charles E. Barnhart Building
 Lexington, Kentucky 40546-0276
 Phone: (859) 257-7292 Fax: (859) 257-7290

or email to:
KALP-L@LSV.UKY.EDU