

TO BE COMPLETED BY CANDIDATE'S REFERENCE

**CANDIDATE REFERENCE FORM
CERTIFIED INSTRUCTIONAL LEADER (CIL)**

Letters of Reference

Name of Candidate: _____

Each Certified Instructional Leader (CIL) Candidate is asked to secure one letter of recommendation from an immediate supervisor. The letter of reference should include a copy of this form.

To the Candidate's Reference:

The Certified Instructional Leader (CIL) selection committee appreciates your help in assessing this potential CIL candidate's skills, knowledge, and potential in the area of school leadership. Please base your comments on the Candidate's professional performance. Limit your comments to one 8 ½ x 11" page, using at least 12 pt. type. Your letter of reference scanned and sent electronically to pd@clasleaders.org.

Please print or type. (I attest that I am the candidate's immediate supervisor.)

Printed Name of Reference Title

Address

City State Zip

Phone (including area code) Fax (including area code) E-Mail Address

Signature of Reference Date