

**PennWest University
Educational Leadership MED Principal K-12 Certification**

Mentor Principal Identification and Recommendation

Name of Candidate:

Name of Mentor Principal: _____

Title of Mentor Principal:

Signature of Mentor Principal: _____

Mentor School District/

Organization: Mentor Address:

Mentor Phone: E-Mail: _____

Mentor Principal Directions: Please rate the candidate's potential for graduate study in the field of educational leadership by marking an X in the appropriate column. Please return complete form to candidate.

Accomplished---Candidate shows superior evidence (This should be reserved for only the most exceptional candidate.)

Target-Candidate shows expected evidence

Not ready-Candidate has not demonstrated evidence of readiness for a graduate program in educational leadership

Accomplished Target Not ready

Candidate demonstrates evidence of oral and written communication skills			
Candidate demonstrates evidence of commitment to professional growth			
Candidate has demonstrated evidence of leadership potential			
Candidate has had experience with diverse learners and/or community members			
Candidate demonstrates ability to use technology			
Candidate demonstrates evidence of positive interpersonal skills			