

**Campus-Based Transition Program  
Recommendation Letter**

**Name of Applicant:** \_\_\_\_\_

Please answer the following questions to the best of your ability.

**About the person writing this recommendation:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

I have known the Applicant for: \_\_\_\_\_

**Please answer the following questions:**

Describe the Application in three words: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Please tell us why you feel the applicant would benefit from participating in this program:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any additional supports you feel that the applicant may need to be successful in this program:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please share any concerns you have regarding the applicant's participation in this program:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are some ideal working conditions that you feel the applicant would feel most comfortable in? Ex. Noisy/quiet, independently/with people.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please rate the following as it pertains to the applicant:

	Strong Point	Meets expectations	Support Needed
Organization/Planning			
Listening/Following directions			
Asking for help			
Taking initiative/motivated			
Recognizing and responding appropriately to needs of others			
Appropriate communication skills			
Dealing with stress/frustration			
Adapting to new situations			
Receptive to feedback			
Emotional stability			
Reliability/Dependability			
Ability to be cheerful, have fun, and smile			

Additional Comments:

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This letter should be emailed to [megan.mastrobuono@escoco.org](mailto:megan.mastrobuono@escoco.org) or submitted with your CBT application.