

## RECOMMENDATION FOR THE PROFESSIONAL CERTIFICATE

Please provide a recommendation for the following individual:

\_\_\_\_\_  
Name Social Security Number  
\_\_\_\_\_

This is to certify that \_\_\_\_\_ was/is employed in this school district in an educational capacity from \_\_\_\_\_ to \_\_\_\_\_; for a total of \_\_\_\_\_ school months (or) \_\_\_\_\_ days (or) \_\_\_\_\_ years in grade(s) \_\_\_\_\_ and subject(s) \_\_\_\_\_.

This position was as a \_\_\_\_\_ contracted teacher or \_\_\_\_\_ substitute teacher.

Did this position REQUIRE a valid teaching certificate? \_\_\_\_\_

Our records report the candidate's performance as:

\_\_\_\_\_ Satisfactory \_\_\_\_\_ Cannot Recommend (please explain on a separate sheet)

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Superintendent OR Director of Personnel

\_\_\_\_\_  
School District

\_\_\_\_\_  
School or School District Fax Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

Please return to 206 Porter, Eastern Michigan University, Ypsilanti, MI 48197  
attention **Nancy L. Dahl, Coordinator, Continuing Certification**