2024 Xavier University Summer Service Internship Intern Recommendation Form

	How long					
Individual Completing For	m:	E-mail:		Tel:		
In what capacity have you	known the applicant?					
Please Rate the Applic	cant on the following qualit	es:				
Descriptors			Ratings			
	·	Always	Often	Sometimes	Rarely	
The applicant is trustworth						
The applicant makes a pogroup/organization	•					
The applicant interacts we	ell with co-workers/peers					
The applicant follows dire						
The applicant takes initiati						
	ole, mature, and resourceful					
The applicant copes well i						
	and readily volunteers to help w					
	nd adjusts well in difficult situation	ins				
The applicant has a strong The applicant has a high e						
	student has demonstrated that	they will work to benefi	t others thro	ugh service and	l gain from	
,	ou think they would contribute to	. 0				
Describe the area(s) in ne seen the student seek gro	eed of growth for the applying stoom to the second	udent. Is the student av	vare of these	areas, and how	v have you	
Any additional comments	you would like to make: (feel fre	e to attach additional pa	ges)			
Signature	Γ	Date Title				
	ely, responding to all items. Whil leted form is required. Please e		tach additior	nal information, t	his is not	
• Mail:	Shannon Hughes Dorothy Day Center for Fai 3800 Victory Parkway Cincinnati, Ohio 45207-214 Attention: Summer Service	ł1				
• E-mail:	hughesse1@xavier.edu					

Deadline:

All recommendations must be submitted to Shannon Hughes (hughesse1@xavier.edu) in the Dorothy Day Center for Faith & Justice by **5pm on Friday, Feb 16, 2023.**