Dear Colleague

RE: Assessment of Applicant - Selection of Education Officer

I am writing to offer some guidelines for the completion of this significant task.  In completing the attached form, you are writing from the perspective of someone who knows the applicant and can give an objective assessment of his/her strengths and limitations.

The role of the referee is not an advocacy role, but rather the role of one representing the employer.  This requires an objective presentation of your views about the applicant’s ability to be effective in the position applied for. While the verbatim report is confidential and available only to the selection panel, the general nature of your report should be discussed with the applicant prior to submission.

The referee report will be confidentially destroyed within twelve months if being lodged with the CEO. If this applicant subsequently applies for another Education Officer position in the twelve month period, he/she will be asked to verify your ongoing support. If you wish to change your referee report at that time, please contact me on 02 4253 0942.

I would ask that the pro-forma be returned to me as soon as possible. The preferred method for receiving referee reports is via email, a signature is not required if emailed directly to me.

Thank you for your attention to this matter.  It is an important task as it provides input into the process of placing people into significant leadership positions in the Diocese.

Yours sincerely,



### Carolyn Hadley

**Head of Human Resource Services**

# Referee REPORT FOR EDUCATION OFFICER POSITIONS

##### [ ]  Head of School Service / Area Administrator / Supervisor

##### [ ]  Current Principal / Employer

##### [ ]  Nominated Referee

*Three referees required – one from each of the above.*

*For members of the Interview Panel only.*

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| **TO BE COMPLETED BY THE APPLICANT** |
| **Name:**  |  |
| **Position:** |  |

**Please return the completed form to the following:** *(address given in the advertisement)*

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| **To:** |  |
| **School:**  | Choose an item. |
| **Address:** |  |

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| **TO BE COMPLETED BY THE REFEREE** |
| **Name:**  |  |
| **Position:** |  |
| **Phone Number:**  | *(If further information is required)* |

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| 1. **BACKGROUND INFORMATION**
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| * 1. **In what capacity do you know the applicant?**
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| * 1. **For how many years have you known the applicant in a professional capacity?**
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| 1. **SELECTION CRITERIA**
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| 2.1Please mark the appropriate box in relation to how the applicant meets each criterion statement. |

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| **RELIGIOUS LEADER** | Outstanding | Strong | Satisfactory | SomeConcern | SeriousConcern | Unable tocomment |
| Commitment to the Church’s mission demonstrated by:  |  |  |  |  |  |  |
| 1. regular worship
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 1. integration of faith in daily living
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Ability to articulate a personal vision of the spiritual dimension of the school | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| A sound understanding of Church tradition, teaching and culture | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Knowledge of current trends in Religious Education curriculum | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Commitment to the integration and transmission of gospel values through the curriculum | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| --- |
| **Further comment***(optional)* |
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| **EDUCATIONAL LEADER** | Outstanding | Strong | Satisfactory | SomeConcern | SeriousConcern | Unable tocomment |
| Evidence of effective classroom teaching | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Leadership in curriculum development and implementation | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Understanding of trends and issues in curriculum and the requirements of relevant educational authorities | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Evidence of a commitment to ongoing professional development | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Ability to articulate a philosophy of education for Catholic schools | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **Further comment***(optional)* |
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| **COMMUNITY LEADER** | Outstanding | Strong | Satisfactory | SomeConcern | SeriousConcern | Unable tocomment |
| Ability to establish positive relations with staff | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Demonstrated commitment to the appropriate skills for a collaborative style of leadership | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Demonstrated commitment to a co-operative relationship between parish and school | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Ability to establish professional relationships with students, teachers, parents and members of the wider community | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **Further comment***(optional)* |
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| **ADMINISTRATIVE LEADER** | Outstanding | Strong | Satisfactory | SomeConcern | SeriousConcern | Unable tocomment |
| Demonstrated skills in - |  |  |  |  |  |  |
| 1. organisation
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 1. communication
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 1. time management
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 1. delegation
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| 1. supervision
 | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| Experience in policy development and implementation | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |

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| **Further comment***(optional)* |
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| **2.2 General comments on the criteria listed previously** (*optional*) |
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| 1. **PLEASE PROVIDE FURTHER COMMENTS ON THE FOLLOWING:**
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| **3.1 Professional judgement.** |
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| * 1. **Ability to cope with stress.**
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| * 1. **What in your view are the current development needs of the applicant?**
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|  |
| * 1. **On what grounds would you recommend/not recommend the applicant for this position?**
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| **Signed:**  | **Date:    /    /** |

***Please return the completed form to the address provided on the first page*.**