



University of Hawai'i at Mānoa
 Conference Housing
 2569 Dole Street
 Frear Hall
 Honolulu, Hawai'i
 96822-2381
 808.956.7436

REFERENCE FORM

Residence Hall Conference Staff Positions

DUE DATE: _____

Applicant's Last Name	First Name	Middle Name or Initial

Initial in the appropriate box: I, an applicant for a hall staff position, am [] retaining/ [] waiving my right of access to my application file. If I am retaining my right of access, I will be able to see this reference. If I waive my right of access to my application file, I will NOT be able to see this reference.

Signature

If you prefer, you may respond on a separate sheet of paper. However, please be sure to complete the information below and submit this form with any attachments. Thank you.

Date

Name of Reference Person [Please print]

Organization

Title	Signature

Send to:

Brinn Higashionna
 Student Housing Services
 2569 Dole Street
 Frear Hall
 Honolulu, Hawaii 96822-2381

Email: brinnh@hawaii.edu
 Fax: 808.956.5995

How long have you known the applicant and in what capacity?

Please comment on this person in terms of the following:

A. *Ability to effectively communicate and relate to other people.*

[PLEASE TURN OVER]



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Please comment on this person in terms of the following:

B. Emotional maturity and ability to work under pressure.

C. Dependability, attitude and integrity.

D. Ability to exercise reasonable judgement and to make appropriate decisions.

E. Check one: I recommend this person with no reservations

I recommend this person with the following reservations:
