



*Academic Resource Center*  
**Student Worker Referral**

Student:	Position(s): <input type="checkbox"/> Supplemental Instruction Leader <input type="checkbox"/> Peer Tutor	Courses:
Please evaluate the above student's knowledge of the courses listed:	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Average	
Comments:		
<i>I recommend the above student for the position(s) specified above.</i>		
Printed Name:	Department:	Extension:
Signature:	Title:	Date:

