

College of Charleston Orientation Internship

Applicant Reference

I hereby waive any and all rights of access to this document which is to be included in my application for the Orientation Internship at the College of Charleston. This waiver applies to the Family Education Rights and Privacy Act. I understand that this document may not be used for any purpose other than the evaluation of my qualifications for employment.

Authorizing signature of applicant _____ Date _____

Full name of applicant _____

To the evaluator: The above student is applying for the Orientation Internship with the Office of New Student Programs at the College of Charleston. If selected, this student would be a representative of the College and would welcome new students and their families to our college community. Our Interns are expected to maintain a high degree of professionalism and should exhibit significant leadership skills. Please evaluate the capabilities of this student based on your interactions. We value your assistance with our selection process.

The forms can be sent directly to the Office of New Student Programs by email, mail or campus mail. If the applicant would like to turn the references themselves, the references should be in a sealed envelope. **If writing a reference letter is easier, it will be accepted.** Please cover the areas listed below in the letter.

Reference name: _____

1. Please describe the length and capacity of your relationship with the applicant:
2. Please rate the applicant in the following areas by placing a check in the appropriate box. If you have *additional comments, please use the back of the page or attach a letter*):

| | Above Average | Average | Below Average | Not Observed | Comments |
|----------------------|---------------|---------|---------------|--------------|----------|
| Professionalism | | | | | |
| Tolerance | | | | | |
| Responsibility | | | | | |
| Maturity | | | | | |
| Cooperation | | | | | |
| Communication Skills | | | | | |
| Punctuality | | | | | |
| Leadership | | | | | |

3. Overall Evaluation: (please circle one)

Do not recommend

Recommend
with reservations

Recommend

Highly
Recommend

Please return this form by February 6, 2026, to:

The Office of New Student Programs, 66 George St. Charleston, SC 29424
Phone: 843.953.2017 - Fax: 843.953.5800 - Email: orientation@charleston.edu