

## Education Institute Intern Faculty Recommendation Form

### Instructions for College Faculty

The student identified below is applying for an internship experience in a department/center of the Education Institute at the Cleveland Clinic. Your recommendation is required to complete the application. The Education Institute oversees many of the world-class training programs offered to physicians, nurses, medical students, residents and fellows, allied health professionals and outside healthcare executives. Educational internship opportunities exist in finance, web design, curriculum development and assessment, medical photography, medical illustration, project management, etc. We welcome your assessment of the student to ensure their educational level appropriately aligns with the internship opportunity.

Student Name: Cathryn A. Hennes, M.Ed.

Expected Date  
of Graduation: Fall 2017

Please rate the Applicant in the following categories using the Likert scale below:

	5 Excellent	4	3 Neutral	2	1 Poor	UA (Unable to Answer)
Quality of Work	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Innovation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative/Motivation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willing to Help Others	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Ethic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	5 Highly	4	3 Neutral	2	1 Not	UA (Unable to Answer)
Your Overall Recommendation of the Applicant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Relationship to the Applicant (e.g. program director, faculty, adjunct faculty, instructor, academic advisor, etc.):

Instructor

How long have you known the Applicant?

a little over a year now

**Additional Information: Indicate Applicant's strengths and areas that require further development.**

Strengths: Excellent technology skills; excellent academic achievement; very creative; engages in activities giving her all; excellent people skills

Areas Requiring Further Development:

- none - Cathy learns quickly and efficiently with a great attitude.

*KR Boyl*

Your Name/Title: Karen R. Boyle, Instructor  
Place of Employment: Cleveland State University  
Phone Number: 216.401.2866 Email Address: K.R.Boyle@csuohio.edu  
Signature: Karen R Boyle Date: 19 March 2017

Return Completed Waiver and Recommendation Forms directly to:

Cleveland Clinic  
Education Institute  
College/University Internship Program  
9500 Euclid Ave. / NA22  
Cleveland, OH 44195  
Email: [Elinternships@ccf.org](mailto:Elinternships@ccf.org)

KRBoyle@tmc.com

Thank you for your assessment.