

SCHOOL PLANT OFFICIALS SOCIETY OF ALBERTA
SCHOOL PLANT OFFICIALS ASSOCIATION OF BRITISH COLUMBIA

SPONSORSHIP FORM

Dear Sponsor:

This is a request for your help in providing a reference for the person whose name appears below. This individual is applying for certification as a _____. As part of the certification process, the applicant must be sponsored by a certified member of SPOSA or SPOA who are knowledgeable of his/her qualifications as a School Plant Official. Please provide your comments and return the letter to the applicant in a sealed envelope, with your signature across the seal. Also, please include a business card. Thank you.

Applicant's name, mailing address, phone, and fax:

STATEMENT BY APPLICANT: I do _____ do not _____ hereby agree to relinquish my right to review this reference at a future date.

Applicant's Signature _____ Date _____

GENERAL: How long have you known the applicant? _____ years. In what capacity have you observed his/her activities as a school plant official?

PROFESSIONAL QUALIFICATIONS:

Evaluate the applicant based on his/her demonstrated expertise in the use and application of core competencies relevant to the certification level the applicant is applying for.

Highest Expertise	Above Average	Qualified	Below Average	Unqualified	Unknown
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Comments:

Please add any additional comments that would be helpful in evaluating the educational and professional qualifications of the applicant.

Printed Name of Sponsor: _____

Signature of Sponsor _____

Date _____