

INTERVIEW SESSION FEEDBACK FORM  
DIRECTOR OF GOVERNMENT RELATIONS

CANDIDATE'S NAME: \_\_\_\_\_

.....  
Please circle your employee or other designation:

Administrator	Board Member	Dean/Assoc. Dean	Department Head	
Direct Report	EC Member	Faculty	Staff	Other

Indicate the strengths this candidate will bring to this position.

Indicate the concerns you have for this candidate's success in this position.

Other comments:

\_\_\_\_\_ I find this candidate to be acceptable for this position.

\_\_\_\_\_ I find this candidate to be acceptable for this position, although I have some reservations.  
(Please see above.)

\_\_\_\_\_ I find this candidate to be unacceptable for this position. (Please see above.)

Please return to Ms. KIMBERLY TURNER within 24 hours. [KTurner18@atu.edu](mailto:KTurner18@atu.edu) President's Office