INTERVIEW SESSION FEEDBACK FORM

Director of Human Resources

(Please write clearly.)

| CANDIDATE'S NAME: | | | | |
|----------------------|--|------------------------------|-----------------|-----------|
| ****** | ******** | ******** | ******* | ******* |
| Please circle your e | employee or other design | nation: | | |
| Administrator | Board Member | Dean/Assoc. Dean | Department Head | Athletics |
| Direct Report | EC Member | Faculty | Staff | |
| Indicate the streng | ths this candidate will br | ing to this position. | | |
| Indicate the concer | rns you have for this cand | didate's success in this pos | ition. | |
| Other comments: | | | | |
| I find this c | 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.) | | | |
| | | | , | |

Completed forms may be returned to Kimberly Turner in the ATU Office of the President at kturner18@atu.edu.