

## PERSONAL RECOMMENDATION (Performance Rating)

GULA                      LOUIE                      PETERE  
 Name of Applicant: LAST NAME                      FIRST NAME                      MIDDLE NAME

The Scholarships for Instructors' Knowledge Advancement Program (SIKAP) Grant Implementing Team greatly appreciates your cooperation in assessing the Applicant for the Grants under CMO No. 16, s. 2021 or the "Revised Guidelines of the CMO No. 06, . 2020 for the Full-Time SIKAP Grant Scholars". Please give your evaluation as to the applicant's professional strengths and weaknesses. Rest assured that all information you will provide shall be held in strict confidence.

You are requested to submit the duly accomplished forms, on or before the deadline provided by the CHED RO In charge of the HEI where the degree program is pursued.

- How long have you known the applicant and in what capacity? Please check (O the appropriate answer.

✓	Connection	Number of Years
	As her/his former professor	
	As her/his colleague	
✓	As her/his employer/supervisor	3
	Others (please specify) _____	

- Rate the applicant on each characteristic using the scale. Please check V) the appropriate answer.

Characteristics	Outstanding	Satisfactory	Unsatisfactory	Poor
Intrinsic intellectual ability	✓			
Written expression skills	✓			
Clarity of oral expression	✓			

Diligence in study and work habits		✓		
Motivation to learn new things	✓			
Maturity	✓			
Emotional stability	✓			
Integrity	✓			
Initiative		✓		
Resourcefulness	✓			
Responsibility		✓		
Carefulness in work	✓			
Compliance with policies and procedures		✓		
Ability to work with others	✓			
Ability to adjust in new situations		✓		
Resilience in the face of adversity	✓			
Leadership qualities	✓			
Potential for success in major field / discipline	✓			

3. Please provide your overall impression of the applicant's skills, abilities, and personality traits that will have a direct bearing on the applicant's success in completing

completing the graduate degree program on time. Cite specific instances, if able.  
He is ready to embrace the doctorate task. He is also  
dedicated to his studies.

4. Which overall recommendation would you give? Please check the appropriate answer.

I highly recommend the applicant	<input checked="" type="checkbox"/>
I recommend the applicant	<input type="checkbox"/>
I recommend with the following reservation	<input type="checkbox"/>
I do not recommend the applicant	<input type="checkbox"/>

If there are any important comments you would like to give which are not sufficiently covered by the above questions, we would greatly appreciate it if you provide them below:

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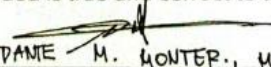


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We are aware that we are asking for considerable time and effort on your part in completing this form. Therefore, we want to assure you that your generous assistance in giving this appraisal is very helpful to us and the applicant and is greatly appreciated.

Recommending Person's Full Name:	DANE M. MONTER., MAT-PE
Position:	SCHOOL PRINCIPAL
Office / College:	PHYSICAL EDUCATION DEPARTMENT
Institutional Affiliation:	SAINT JOSEPH COLLEGE
Institutional Address:	MAANIN CITY, SOUTHERN LENTE
Gov't Issued ID Number	PRC : 0439468
Contact Number:	+63917 506 2657
Email Address:	dandelden72@yahoo.com

I certify that all information provided is true and correct to the best of my knowledge.

  
 DANE M. MONTER., MAT-PE / 9/27/22

SIGNATURE OVER PRINTED NAME AND DATE