



San Juan
Unified School District

WorkAbility

5325 Garfield Avenue, Sacramento, California 95841

Phone (916)-979-8610 Fax (916) 979-8612



Shelley Ellinghouse, Director of Special Education

Julia Arreguin, WorkAbility Administrator

Student's Name: _____ Date: _____

The above named student has applied for a paid work experience position with the San Juan Unified School District. This will be a temporary position designed to build the student's vocational skills and enhance their employability.

Name of Reference: _____

Organization: _____

1. When did the student work/volunteer with you?
2. What were the student's duties and responsibilities?
3. What are the student's strengths?
4. What are the student's areas for improvement?
5. Please describe the student's communication skills.
6. Describe the student's ability to deal with co-workers, peers and/or members of the public?
7. On a scale of 1 to 10; with 10 being regular and punctual, and 1 being frequently absent or late, how do you rate the student's attendance and promptness (circle)?
 POOR ← 1 2 3 4 5 6 7 8 9 10 → EXCELLENT
8. Do you recommend this student for participation in a paid work experience (circle)? YES NO
9. Are there any additional comments you feel might be helpful to us in making our decision?

The SJUSD WorkAbility department thanks you for taking the time to complete this reference.

Signature of Reference

Date