

## Candidate CST Recommendation

Name:

Email:

Are you a Certified Scrum Trainer (CST)?:

Yes     No

Today's Date:

Name of candidate:

Have you co-trained with this candidate?

Yes                  No

If yes, how many of each of the following course types have you co-trained with this candidate?

CSM     0     1-3     4-9     10+

CSPO:  0     1-3     4-9     10+

Other:  0     1-3     4-9     10+

Do you share a business interest with the candidate?

Yes                  No

How would you describe their preferred teaching style? Lecture / Workshop / TBOR / Other

Lecture     Workshop     TBOR     Other:

Are you happy for members of the TAC to contact you directly regarding this recommendation?

Yes                  No

**WHAT ARE THE CANDIDATE'S STRENGTHS ACROSS THE FOLLOWING AREAS?**

Scrum Knowledge & Experience

Classroom Management & Student Engagement

Teaching Style / Method

**WHAT ARE THE CANDIDATE'S OPPORTUNITIES FOR IMPROVEMENT ACROSS THE FOLLOWING AREAS?**

Scrum Knowledge & Experience

Classroom Management & Student Engagement

Teaching Style / Method

Can you describe any specific feedback you have given to the candidate, and how they have acted on it?

What involvement does the candidate have in the Scrum community?

On a scale of 1 to 10, how ready would you be to turn over your own class to this candidate tomorrow? (1 = “No way!”, 10 = “No problem!”)

- 1    2    3    4    5    6    7    8    9    10

What would the candidate need to demonstrate in order to score a 10 on the above scale?

Any other comments you feel would strengthen the candidate’s application?

Do you endorse this candidate for the CST certification?

- Yes    No