Commissioner, Department of Elementary and Secondary Education

Interview Feedback Form\*

Finalist (Circle One): Infante-Green / Riley / Schwinn

(Please submit a separate form for each candidate about whom you would like to provide feedback)

Your Name & Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Required for consideration)

Strengths:

Weaknesses:

Other Comments:

Signature & Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_