



Facilities Planning
& Management
UNIVERSITY OF WISCONSIN-MADISON

Candidate Feedback Form

Candidate: _____

Interviewer: _____

Please describe the strengths of this candidate:

Please describe any areas of concerns with this candidate:

Other comments:

Recommendations:

_____ Outstanding Candidate

_____ Acceptable Candidate

_____ Unacceptable Candidate

Please submit your feedback forms to Molly Lenz molly.lenz@wisc.edu or 21 N. Park Street room 6101 by **February 23**.