

PART A — To be completed by student

Please read the paragraph below very carefully and select either confidential or non-confidential in the appropriate space before giving this form to the individual writing the recommendation. This letter of reference must be completed by employers, supervisors and/or professors.

Name of Applicant: _____

The applicant has chosen that this statement be **CONFIDENTIAL** or **NON-CONFIDENTIAL**, according to the Family Education Rights and Privacy Act of 1974. Confidential references are prepared for the use of the Office of Graduate Studies & Adult Education and should not be shown to the candidate. Non-confidential references may be viewed by the candidate.

PART B - To be completed by reference

The following information will be used in making an evaluation of the applicant's strengths and weaknesses as related to graduate study. Please use additional paper if necessary.

1. In what professional and/or personal capacity and for how long have you known the applicant?

2. How well does the applicant express himself/herself verbally? In written form?

3. Please comment on the applicant's analytical ability to give professional nursing care.

REFERENCE – Graduate Nursing Programs

4. Please comment on the applicant's interpersonal skills, both with individuals and with groups.

5. Please discuss any specific factors in the applicant's background that demonstrate motivation and preparation for undergraduate (or graduate) work.

6. Please make any additional comments you may have about the applicant's personal qualities, extracurricular activities and general strengths or weaknesses.

7. Please check one: (overall rating)

- Strongly Recommend
- Recommend
- Recommend with Reservation
- I do not recommend this applicant for admission to graduate study.

Please print:

Name: _____
First *Last* *Middle*

Employer: _____ Title: _____

Business Address: _____
City *State* *ZIP Code*

Signature: _____ Date: _____