

Letter of Reference

Please type or print clearly with a pen.

TO THE APPLICANT: Depending on which program you are applying to, please duplicate this form as needed. Your letters of reference (in a sealed envelope with the signature of the person writing the reference across the seal of the envelope) must accompany your application. You are responsible for making sure all references are received in a timely manner.

Applicant name _____

Program for which you are applying _____

TO THE REFERENCE: This reference is confidential and will be used only in the admission process as additional information about the applicant. It will be destroyed before the student’s permanent file is compiled. There are two parts to this letter of reference. The provided table allows you to rate the applicant in relation to his/her peers on a variety of characteristics. Additionally, we would request that you provide a letter on the applicant’s behalf (letters done on a computer are preferred). Please return this reference letter to the applicant in a sealed envelope (sign name across seal of the envelope) to include with his/her application.

How long have you known the applicant and in what capacity? _____

PART 1: In relation to her/his peers, please rate the applicant on the following characteristics:

	EXCEPTIONAL TOP 10%	ABOVE AVERAGE TOP 25%	AVERAGE TOP 50%	BELOW AVERAGE LOWER 10%	UNKNOWN
Academic preparation					
Motivation and commitment to learning					
Discipline and ability to set priorities					
Interpersonal skills (<i>cultural sensitivity, empathy</i>)					
Oral communication skills					
Leadership abilities					
Critical thinking					
Clinical expertise (<i>if applicable</i>)					
Integrity					

OVER PLEASE

PART 2: Please use a computer for this letter. While you are welcome to address any areas you wish, we would find information on the following areas to be of the most help to us.

- The applicant’s interpersonal skills, especially communication, leadership, and ability to function in an interdisciplinary manner with others
- Information about the applicant’s strengths, qualifications, traits and/or accomplishments that you feel significantly demonstrates his/her ability to be successful in a competitive and rigorous program
- Discuss the applicant’s potential to be a competent, caring, and ethical healthcare professional
- The applicant’s clinical expertise and judgment (if applicable)
- The applicant’s theoretical knowledge base for the type of critical care nursing he/she practices (for CRNA applicants only)

On the basis of your knowledge of the applicant, please indicate the strength of your recommendation:

- Enthusiastically recommend
- Recommend
- Do not recommend

SIGNATURE	DATE
TYPED OR PRINTED NAME	TITLE
SCHOOL/ORGANIZATION	WORK PHONE
WORK EMAIL	