Laboratory Student Programs REFERENCE FORM

INSTRUCTIONS

- → To the Applicant: You may use this form *or* an official reference form from your college or university. Complete Section 1 of this page and print your name at the top of page 2 before sending to the person providing the reference. Be sure to provide each reference with the address of the laboratory(s) to which you are applying.
- → To the Person Providing the Reference: Thank you for your willingness to evaluate and provide information regarding this applicant. Your reply is critical because the applicant will not be considered for acceptance to a clinical laboratory science program without your appraisal. Please provide a candid appraisal of this applicant by completing Section 2 below and by providing narrative comments on page 2. The applicant should have provided you with the name and address of the laboratory(s) to which this reference form should be sent.

<u>SECTION 1</u> (to be completed by applicant):

In accordance with the Family Education Rights and Privacy Act of 1974 (Public La 93-380), I understand that I have the right to review this letter of reference based on my preference, which I have indicated below. (*You must choose one.*)

	Non-confidential, open to my review	Confidential, not open to my review					
Applicant's Name	(Print)	Applicant's Signature					
Address:		City/State/Zip:					
Program App	plying For (check one): Medical Labora	edical Laboratory Science (MLS) Histotechnician (HT)					
SECTION	$\underline{2}$ (to be completed by reference):						
How well do	you know the applicant? very well	fairly well		slightly			
How long have you known the applicant? In what capacity?							
Has the appl	icant discussed career goals with you?	yes no					
	Characteristics	Out- standing 4	Very Good 3	Good 2	Fair 1	Poor 0	Unable To Judge
Punctuality	Ability to meet scheduled times						
Quality of w	vork: Level of thoroughness, accuracy						
Responsibili	ity: Willingness to take on/assume responsibility	ty					
Initiative: S	Self-starter						

Applicant's Name	
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Characteristics	Out- standing 4	Very Good 3	Good 2	Fair 1	Poor 0	Unable To Judge
Confidence: Extent to which applicant is confident in his/her judgments and performance						
Reaction to constructive criticism: Acceptance and action						
Team skills: Ability to work collaboratively with others Analytical skills: Ability to problem solve, correlate, and process information from multiple sources and to think critically						
Verbal skills: Clarity of expression, articulateness						
Written expression: Clarity, conciseness						
Motivation: Depth of commitment to pursuing a career in selected area						
Empathy: Sensitivity to the needs of others, consideration, tact						
Ability to work under pressure: Balance, ability to cope						
Organization: Efficiency, effective use of time						
Ability to work independently						

Please provide narrative comments about the applicant with a description of positive or negative attributes. (Please use the space below or provide separate attachment.)

Overall recommendation: (please mark one box)	highest recommendation- without reservation	recommend	recommend with reservations	do not recommend
Signature:		Date:		
Printed Name:		Position/Title		
Institution:		City/State/Zip:		
E-mail:		Phone:		