

Alvernia University
Master of Science in Nursing Program
Request for Recommendation

This section to be completed by applicant

Name of Applicant: _____

Name of Person Providing Recommendation: _____

Applicant's Statement: I am aware that under the congressional Family Educational Rights and Privacy Act 1974 (Sec. 438 (a) (20) (B) c (c), I am not required to, but that, I may voluntarily waive my right to access confidential letters and Statements of recommendation submitted to Alvernia University in support of my application to the Graduate School. I further understand that the provision of the Family Educational Rights and Privacy Act, an unsuccessful applicant, regardless of whether such applicant has signed a waiver, has no right to inspect any of the admission application materials accumulated in his/her case. The giving of a waiver shall not be regarded as a condition of admission to, receipt of financial aid from, or receipt of any other services or benefits from the University.

I hereby: () do () do not waive my rights to access any and all letters or statements of recommendation which may be submitted by _____
(Person submitting recommendation)

Signature of Applicant

Date

The above applicant has applied for admission to the Alvernia University Master of Science in Nursing Program. As a reference in support of this applicant, please respond to the following questions and rating instruments. **Please return this form to the applicant. Place the form in a sealed envelope, and place your signature across the seal.**

I have known this applicant for _____ years _____ months. The applicant is or was my (check all that apply):

_____ colleague _____ student _____ employee _____ volunteer _____ other

(Please specify) _____

OVERALL RECOMMENDATION: Please check the appropriate level of recommendation

_____ Highly recommended
_____ Recommended with reservation

_____ Recommended
_____ Not recommended

Name (printed)

Title

Address

Occupation

City/State/Zip

Phone Number

(over)

04-08

Please place an "X" in the rating column which best describes the applicant's character and qualifications for the nursing profession.

	Outstanding	Above Average	Average	Below Average	No Opportunity To Observe
1. Attitude and Personality: Mannerisms, disposition, ability to work with people, confidence, acceptance of criticism.					
2. Reliability and Character: Dependability, willingness, honesty, moral character.					
3. Personal Appearance: Cleanliness, grooming.					
4. Work Habits and Industry: Conscientiousness, following through, resourcefulness, self-discipline, initiative.					
5. Emotional Stability: Reaction to stress, poise, control, inspiring confidence.					
6. Capacity for Independent Thinking: Leadership ability, creative thought, curiosity.					
7. Judgment and Common Sense: Ability and foresight in everyday decisions, expression of opinion, maturity.					
8. Oral Expression: Clarity, coherence, and confidence in conversation.					
9. Written Expression: Clarity, coherence, organization, and grammar.					
10. Ability to analyze a problem and formulate a solution.					
11. Ability to work with people of diverse backgrounds.					
12. Commitment to high ethical standards.					
13. Capacity for empathy.					
14. Motivation to enter the profession of nursing.					

Signature

Date

Please comment on the applicant's strengths and weaknesses as a potential Master of Science in Nursing student: _____

