



## Academic & Professional References

**Applicant Instructions:** Copy the reference forms as needed and distribute to your referents with stamped envelopes. References should NOT be submitted from relatives, and should include at least one professional reference. Applicants should include a minimum of three references for review. Each reference will be verified as part of the admissions process.

Please note: Under the Family Education Rights and Privacy Act, students of the University of Nebraska have the right to inspect their files upon request. However, letters of recommendation are destroyed at the time selections are made and prior to the individual becoming a student. Therefore, an applicant will never see a reference form. Once the forms/letters serve their purpose, they are destroyed. This policy assures the person writing the recommendation that this letter will remain confidential.

**Referent Instructions:** This applicant is applying for admission to the BSCLS Degree Advancement Option at UNMC. The BSCLS Admissions Committee greatly appreciates your thoughtful opinions of this person. ***Please be sure to sign and date the bottom of BOTH pages.***

Personal recommendations are a very important part of the application, and they are reviewed carefully by members of the Admissions Committee. We are anxious to select those individuals whose accomplishments, personal attributes, and abilities indicate that they have the greatest potential for baccalaureate-level study and advanced professional development. Therefore, we ask you to provide a thoughtful and sincere appraisal of this applicant. If you do not know the applicant well enough to complete this form, please notify him/her and return the form. Your early reply is appreciated.

Please note: It may not be possible to thank each individual for completing a recommendation form. However, we want you to know that we are aware of the time required to submit a reference, and both we and the applicant are most appreciative of your response. We will contact you to verify this reference.

**Please return form to:**  
SAHP Student Affairs  
University of Nebraska Medical Center  
984035 Nebraska Medical Center  
Omaha, NE 68198-4035

## Academic & Professional References

**Applicant Waiver:** I, \_\_\_\_\_, \_\_\_\_\_ waive \_\_\_\_\_ do not waive,  
(Applicant) Print Name  
any right of access I might have, as provided by law, to letters of recommendation  
completed and submitted at my request.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Referent - Please Type or Print Form:

Your Name: \_\_\_\_\_ Credentials: \_\_\_\_\_

Your Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ( ) \_\_\_\_\_

### Acquaintance with Applicant

How long and in what capacity have you known this applicant? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Summary of Applicant Potential

Please discuss the applicant's potential for baccalaureate-level study and advanced professional development:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For office use only – Reference Verified**

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Program Official: \_\_\_\_\_

**Personal and Professional Appraisal**

Please rate the applicant in the following categories, using a scale of 1 to 5 with 5 being superior and 1 being poor. If you have no basis for evaluation in any category, please check "No Basis." Comments for ratings below average are helpful and greatly appreciated.

Characteristic	Superior 5	4	Average 3	2	Poor 1	No Basis	Comments
Academic Potential for Advanced Study							
Mathematics and Computer Skills							
Oral Communications Skills							
Written Communications Skills							
Analytical/Technical Skills							
Problem Solving Ability							
Organizational Ability							
Ability to Work with People							
Initiative/Motivation							
Ability to Work Independently							
Ability to Focus on the Task-at-Hand							
Flexibility/Ability to Adapt to New Situations							
Reliability							
Integrity							
Sense of Responsibility							
Leadership							
Other:							

**Overall Recommendation:**

Strongly Recommend     
  Recommend     
  Recommend with Reservations     
  Do not Recommend  
 (Please explain with an attached page)

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

