

Master of Science in Nursing
Regents Online Degree Program

Recommendation

Thank you for completing this reference. Please complete and return this form to the graduate division of the applicant's home school.

_____ (address to be inserted by applicant)

Applicant Section (to be completed by the applicant)

I, _____, have asked _____ to provide this reference.
Applicant name (please print) *Reference Name*

The Family Educational Rights and Privacy Act of 1974 and its amendments guarantee students' access to education records concerning them. Students are also permitted to waive the rights to access references. The following statement indicates my intent regarding this reference:

I waive _____ I do not waive _____ my right to see this reference or any supplemental notes or letters pertaining to it.

_____ *Applicant's Signature*

_____ *Date*

Reference Section (to be completed by the reference)

How long have you known this applicant? _____

What was your relationship to the applicant?	_____	_____	_____	_____
Please rate the applicant in the following areas:	Excellent	Good	Average	Poor
Clinical competence				
Personal/professional integrity				
Initiative				
Clinical judgment				
Ability to work with others				
Leadership ability				
Probability of completing an MSN program				
Writing ability				
Intellectual curiosity				

Overall Recommendation:

Strongly Recommend ? Recommend ? Do not recommend ?

_____ *Name of Reference (Please print)*

_____ *Signature*

_____ *Date*

_____ *Organization*

_____ *Title*

If you wish to provide additional comments, please attach a separate sheet.