

MSW PROFESSIONAL REFERENCE



Please complete the top section and present to an individual who has known you over one year and is not a character reference.

TO BE COMPLETED BY THE APPLICANT:

Enrollment Date:

- Fall, 20_____
- Spring, 20_____
- Summer, 20_____

LAST NAME	FIRST NAME	MIDDLE INITIAL	PREFERRED
ADDRESS, CITY, STATE, ZIP			D.O.B. (mm/dd/yy)
HOME PHONE	CELL PHONE	E-MAIL ADDRESS	

Please sign below if you wish to waive your right under the Family Educational Right and Privacy Act of 1974 to access this recommendation.

Signature _____ Date _____

TO BE COMPLETED BY THE REFERENCE:

The above named applicant is applying for admission to Nyack College/Alliance Theological Seminary. Upon completion, please mail, email or fax as indicated on the back of this form. We value your comments, and ask that you provide a full and candid report so that fair consideration may be given to the applicant.

How long have you known the applicant? _____

How well do you know the applicant? (circle on scale)

- What is the nature of your relationship? Teacher Mentor Colleague
 Employer Other _____

1	2	3	4	5
Casually		Fairly Well		Very Well

Please keep in mind (and check) the comparison group you use to rate the applicant: College Seniors First Year Grad Students Professional Educator Other _____

Academic Ability	Below Average	Average	Above Average	Outstanding	No Chance to Observe
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breadth of General Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation for Rigorous Academic Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Character	Below Average	Average	Above Average	Outstanding	No Chance to Observe
Integrity/Loyalty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Advocate for Self and Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Empathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work cooperatively within a team/peer relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values and Respects Diversity/Sensitivity to Vulnerable Populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your evaluation of this candidate for admission:

- I recommend the applicant without reservation
- I recommend the applicant with reservation (please explain in #4)
- I do not recommend the applicant (please explain in #4)

Please answer the following questions including information about the applicant's strengths and areas for growth. Feel free to include the answers in a cover letter or on a separate sheet.

1. How would you evaluate this applicant in terms of her/his emotional readiness for graduate social work education?

2. How would you evaluate this applicant in terms of his/her academic readiness for graduate education?

3. How would you evaluate this applicant in terms of his/her professional readiness for social work education?

4. Do you have any concerns about this applicant becoming a master's level trained social worker?
 Yes No If yes, please explain.

5. Do you want to discuss the applicant with us further?
 Yes No If yes, be sure to include your phone number below.

Mr. _____
 Mrs. FULL NAME
 Miss _____
 Ms. POSITION ORGANIZATION/INSTITUTION
 Dr. _____
 Rev. STREET ADDRESS, CITY, ST, ZIP

HOME PHONE CELL PHONE E-MAIL ADDRESS

Nyack/ATS Alumnus? Yes No
Would you like to receive information about Nyack? If yes, please check which programs: Undergrad Degree Completion
 MA Counseling MBA MS Organizational Leadership MS Education Seminary DMin MSW

Signature _____ Date _____

Return to: Admissions
1 South Blvd.
Nyack, NY 10960

Fax to: 845-358-3047

Scan and email to: admissions@nyack.edu