

## Centre for Nursing and Health Studies

## GRADUATE PROGRAMS: Letter of Reference Form

PLEASE PRINT CLEARLY.	
Last Name of Applicant:	First Name:
Date:	_
To the Person Providing the Reference: The original signed document is required. A faxed copy official document. The letter of Reference form must be preferee's signature written across the sealed envelope flat to the applicant who submits the sealed envelope contain	placed in a sealed envelope by the referee with the p. The envelope with the enclosed form must be returned
Name of Referee:	Title/Designation:
Place of Employment:	
Email Address:	Telephone Number:
1. How long have you known the applicant?	
2. In what capacity do you know the applicant?	
	t on the applicant's ability to comprehend spoken English English is not the applicant's first language, some comment

The information that you supply concerning this applicant will be used in the admission process. No application will be considered complete without this information. Please note that in accordance with the Freedom of Information Privacy and Protection Act of the Province of Alberta, Canada, comments made on this form are NOT considered confidential and may be viewed by the applicant upon request. For further information please contact the Centre for Nursing and Health Studies at 1-800-788-9041 (ext. 6359).

## Letter of Reference Form (continued) Name of Applicant: 4. Ability Rating: In comparison with others at a similar stage in career development, how would you rate this applicant? One of the best I've Excellent - top 10%Good - above Average or No basis for I've known known in my career average below judgement (2)(1) Academic preparation Ability to manage multiple tasks Leadership potential Ability to work independently Writing skills Verbal skills Critical thinking Analytic ability Judgement Overall rating 5. General Appraisal: In reference to #4, please tell us in narrative form why you have rated the applicant in this way. Reference to specific examples or situations may be included. The information that you supply concerning this applicant will be used in the admission process. No application will be considered complete without this information. Please note that in accordance with the Freedom of Information Privacy and Protection Act of the Province of Alberta, Canada, comments made on this form are NOT considered confidential and may be viewed by the applicant upon request. For further

02/2009-cr

Date:

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Signature: