

## **Reference Form**

Program: \_\_\_

Please use black ink

(Please type or print Last, First, Middle Initial)

\_\_CollegeNet Username/ID\_\_\_\_\_

Signature of Applicant

Office of Enrollment Management

45 Courtenay Drive

oesadmis@musc.edu

Charleston SC 29425-2030

MSC 203

Please have this form completed by a current or former instructor, advisor, or supervisor who is in a position to evaluate your potential.

Some individuals prefer not to complete reference forms unless they can be assured of the confidentiality of their comments. It is our opinion that comments provided on a confidential basis are likely to be of more help to us in judging important characteristics such as creativity, originality, independence, and research capability. Therefore, the University is affording you the opportunity to waive your right of subsequent access to this reference statement. Regardless of your decision on waiving your right of future review, your application for admission will be given full consideration.

I do 📮 do not 📮 waive my right of subsequent access to this recommendation form.

Date

Name of Evaluator

(Please type or print)

As required by the Family Educational Rights and Privacy Act, a student may elect to waive the subsequent access to this recommendation form. In either case, the admissions committee would appreciate your opinion concerning the applicant named above.

I have known the applicant for \_\_\_\_\_\_ years in my capacity as \_\_\_\_

Do you have any reason to doubt this applicant's integrity?  $\Box$  Yes  $\Box$  No If yes, please explain separately.

Please rate the candidate in the areas listed below. The mean score will be utilized to rank the applicant.	Highest 5	4	3	2	Lowest	Unable to Rate
Enthusiasm for Science • shows passion towards this career? • demonstrates thirst for knowledge?	О	О	О	О	Ο	О
<ul> <li>Previous Research Experience</li> <li>gained laboratory or other relevant experience?</li> <li>participated in published research studies?</li> </ul>	О	О	О	О	О	О
Academic Achievements • received honors or awards? • excelled in course work?	О	О	О	О	О	О
Leadership Qualities • member of academic associations? • involved in community activities?	О	О	О	О	О	О
Resilience <ul> <li>shows diligence and perseverance?</li> <li>has overcome obstacles to success?</li> </ul>	О	О	О	О	О	О
Intelligence • demonstrates logical thinking, creativity and originality? • appears mentally quick, bright?	О	О	О	О	О	О
Personality • can communicate well with others? • considerate, courteous and honest?	О	О	О	О	О	О

Applicant

Please compose, and attach, a reference letter for the applicant and comment on:

- 1) What you feel are the applicant's strength and weaknesses
- 2) How would you rank this applicant compared to others with regard to their probability of successfully handling advanced coursework and potential as a research scientist
- 3) Any special consideration which should be taken into account
- 4) Other comments that you feel will help us evaluate the applicant

I would recommend the applicant as follows:

	Highest Recommendation	Strong Recommendation	Recommend	Recommend with Few Reservations	Recommend with Reservations	Do not Recommend
For admission to a doctoral program						
For admission to a masters program						

Signature	Emailed, scanned, or facsimile copies of signatures shall be considered valid.	Date
Name and Title (typed or	printed)	Telephone Number
Address		City/State/Zip
Email Address		
		MUSC Alumni?

Please attach any other evaluative documents to this appraisal and return it directly to the Office of Enrollment Management by email to oesadmis@musc.edu, by mail to the address above in a sealed, signed envelope, or by fax with a cover sheet to (843) 792-6356.

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