

• considerate, courteous and honest?

## Reference Form

Office of Enrollment Management
45 Courtenay Drive
MSC 203

Charleston SC 29425-2030

	Program:											
	<del>_</del>	ease use black inl	ζ.									
	Name of Applicant(Please type or print Last, First,	Middle Initial)		CollegeNe	t Username	'ID						
	Please have this form completed by a current or former in	nstructor, advi	isor, or sup	ervisor who	is in a posi	tion to evalua	ate your pot					
	Some individuals prefer not to complete reference forms unless they can be assured of the confidentiality of their comments. It opinion that comments provided on a confidential basis are likely to be of more help to us in judging important characteristic as creativity, originality, independence, and research capability. Therefore, the University is affording you the opportunity to your right of subsequent access to this reference statement. Regardless of your decision on waiving your right of future review application for admission will be given full consideration.											
	I do up do not up waive my right of subsequent access to this recommendation form.											
	Date	Signature of Applicant										
5	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 re											
<u> </u>	mendation form. In either case, the admissions committee would appreciate your opinion concerning the applicant named ab											
•	I have known the applicant for years in my capacity as											
	Do you have any reason to doubt this applicant's integrity?   Yes   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 1	Unable to Rate					
	Enthusiasm for Medical Professions  • shows passion towards this career?  • demonstrates thirst for knowledge?	О	О	О	0	О	0					
	Previous Research Experience • gained laboratory or other relevant experience? • participated in published research studies?	O	О	О	0	O	0					
	Academic Achievements • received honors or awards? • excelled in course work?	О	0	0	О	О	О					
	Leadership Qualities  • member of academic associations?  • involved in community activities?	О	0	О	0	О	0					
	Perseverance     • overcome obstacles     • understands level of commitment to succeed	О	О	О	0	О	0					
	Intelligence • demonstrates logical thinking, creativity and originality? • appears mentally quick, bright?	О	0	О	O	0	0					
	Personality • can communicate well with others?	0	0	0	О	О	О					

Name of Applicant(Please type o	r print Last, First, Midd	le Initial)	C	lllegeNet Username/ID					
Please compose, and attach, a reference	e letter for the	applicant an	d commen	t on:					
<ol> <li>any special consideration whi</li> <li>what you feel are the applica</li> <li>how you would rank this stusuccessfully handling advance</li> <li>other comments that you fee</li> </ol>	nt's strongest ident compar ed coursewor	and weakest ed to other st k and potent	points. udents witl ial as a med	n regard to his	her probabilit				
would recommend the applicant as fo	ollows:								
	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						Date			
Name and Title (typed or printed)					Tel	ephone Number			
Address						City/State/Zip			
Email Address									
				MUSC Alumni?					

Please attach a letter of reference and any other evaluative documents to this appraisal, place in a sealed envelope, sign across the seal, and return to the applicant or mail directly to the Office of Enrollment Management at the address listed at the top of this form. If applicant requests that you fax this information in addition to returning the sealed original, please fax the information to the Office of Enrollment Management at (843) 792-6356.