**MENNONITE COLLEGE OF NURSING**

**AT**

**ILLINOIS STATE UNIVERSITY**

**Reference Form for PhD Program**

*(To be filled out by an employer, direct supervisor, or instructor.)*

**This section to be completed by applicant**

Name: Last Name First Name Middle Name

Address (including street, city, state, zip):

Click or tap here to enter text.

[ ]  I understand that this evaluation will be confidential and I waive my right to read it.

 Signature

[ ]  I do not waive my right to read this form should I enroll at Mennonite College of Nursing; therefor this is

 not confidential.

 Signature

**This section to be completed by person selected to provide reference:**

The above named candidate is applying for admission to Mennonite College of Nursing PhD program. Your cooperation in the following ways will be very valuable to us in considering this candidate for admission:

1. Complete the remainder of this form
2. Provide a letter of reference describing your association with the applicant and any strengths and weaknesses that should be considered in evaluating the applicant’s critical thinking, self-motivation, teamwork and the potential for a research/leadership career

**Mail the completed documents to:**

**Mennonite College of Nursing**

**Illinois State University**

**Graduate Programs**

**Campus Box 5810**

**Normal, IL 61790-5810**

Please rate this applicant on each item as compared to other individuals of similar training and experience with whom you have been associated. Use the following numerical scale.

1. Outstanding 2- Very Good 3- Average 4- Fair

Insert “X” if insufficient knowledge to rate. “NA” if not applicable.

Research Ability and Potential Click or tap here to enter text.

Written and Verbal Communication Click or tap here to enter text.

Perseverance in Pursuing Goals Click or tap here to enter text.

Self-reliance and Independence Click or tap here to enter text.

Integrity Click or tap here to enter text.

Mastery of Student’s Field Click or tap here to enter text.

Originality Click or tap here to enter text.

Accuracy Click or tap here to enter text.

Judgment Click or tap here to enter text.

Adaptability Click or tap here to enter text.

Leadership Ability Click or tap here to enter text.

Do you: [ ] Recommend this applicant [ ] Hesitate to recommend [ ] Not recommend

Respondent Full Name: Click or tap here to enter text. Title Click or tap here to enter text.

Institution: Click or tap here to enter text.

Telephone number: Click or tap here to enter text.

Signature: Date: Click or tap to enter a date.