

Reference Form
College Student Personnel Program

330 Education Building
 Bowling Green State University, Bowling Green, Ohio 43403-0244
 Telephone: (419) 372-7382; FAX: (419) 372-9382; e-mail: hesa@bgsu.edu

I, _____, _____ voluntarily waive _____ decline to waive (check one)
 (APPLICANT'S NAME)

my right under the Family Education Rights and Privacy Act of 1974 to review or examine this recommendation form.

 (SIGNATURE OF APPLICANT)

 (DATE)

Instructions to Reviewers: The above-named person is applying for admission and a graduate internship in the College Student Personnel program at Bowling Green State University. The program is interested in your appraisal of the applicant's qualifications. In accordance with the Family Educational Rights and Privacy Act of 1974, students who are admitted may be given access to this form upon request unless they have voluntarily and explicitly waived their rights to do so.

- Please rate the applicant on each of the characteristics listed below in comparison with others whom you have known at similar stages in their careers. **Please provide ratings below in addition to your written evaluation.** (Check one rating for each category.)
- Please attach a separate letter** in which you explain your ratings given above and in which you address the following questions: a) How well, in what context, and how long have you known this applicant? b) How would you assess this applicant's overall potential for success as a graduate student and as a practitioner in the field of student affairs? Information about the applicant's previous academic achievements and involvement working with college students is particularly helpful.

Characteristic	Top 10% Outstanding	Top Third Very Good	Middle Third Average	Bottom Third Below Average	Inadequate Basis for Judgment
Intellectual Ability					
Interpersonal Effectiveness					
Readiness for Graduate Studies					
Maturity/Stability					
Oral Communication					
Written Communication					
Independence/Self-Direction					
Motivation to Succeed					
Leadership					
Curiosity					
Flexibility/Adaptability					
Sensitivity to Issues of Diversity					
Sense of Humor					
Overall Evaluation					

Name _____
 (PLEASE PRINT)

Signature _____

Title _____

Institution _____

Address _____

Telephone _____

E-mail _____

Your timely cooperation is appreciated. Review and evaluation of completed applications will begin **January 2, 2008**. Thank you!