



San José State
UNIVERSITY

School of Nursing

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Director:

Dr. Jayne Cohen

Dear Colleague,

You have been listed as a reference by one of our applicants to the Master's Degree Program in the School of Nursing at San José State University. Your recommendation for this applicant will be very helpful in the decision making process during application review.

Attached you will find a reference form. The applicant should have completed the top portion of the reference form. In order to complete your portion of the reference packet, please complete the lower portion of the reference form as well as write a letter of recommendation on letterhead stationary. Once these items are complete, put them in an envelope, seal it and place your signature on the sealed flap. The envelope should then be returned to the applicant who will submit it with his/her application packet.

We appreciate your assistance.

The California State University:
Chancellor's Office
Bakersfield, Channel Islands, Chico,
Dominguez Hills, Fresno, Fullerton,
Hayward, Humboldt, Long Beach,
Los Angeles, Maritime Academy,
Monterey Bay, Northridge, Pomona,
Sacramento, San Bernardino,
San Diego, San Francisco, San José,
San Luis Obispo, San Marcos,
Sonoma, Stanislaus

REFERENCE FORM FOR MS NURSING PROGRAM AT SAN JOSÉ STATE UNIVERSITY

Applicant: _____
Last Name First Name Middle Name Previous Last Name

To the Applicant: Applicants are advised that upon their admission to the School of Nursing, the Family Educational Rights and Privacy Act of 1974 accords them the right to review these recommendations unless that right is waived. While applicants are not required to make such a waiver, they are further advised that some individuals may not be willing to supply an appraisal in its absence.

I have requested that this appraisal form be completed by _____ for use in the admissions process of SJSU School of Nursing. In accordance with the Family Educational Rights and Privacy Act of 1974 I hereby:
_____ waive access to this report which should be considered confidential.
_____ do not waive access to this report

_____ Date _____ Applicant's Signature

To the Recommender: The applicant above has applied to the Master's Program in the School of Nursing at San José State and has listed you as a reference. Please evaluate this applicant on the following characteristics. For each characteristic, please circle a number from one (low) to seven (high). This form is a necessary part of the application. In addition to this form please submit, on letterhead, a brief statement regarding the applicant. Please mention your relationship to the applicant, and how long you have known the applicant.

Independence and self direction: sets own goals, organizes and prioritizes work, and initiates/sustains activity to achieve goal
(Low) 1 2 3 4 5 6 7 (High)

Responsibility and accountability: responsible, dependable and accountable for own actions
(Low) 1 2 3 4 5 6 7 (High)

Oral Communication: demonstrates professional interpersonal communication skills
(Low) 1 2 3 4 5 6 7 (High)

Written Communication: organizes well and writes clearly
(Low) 1 2 3 4 5 6 7 (High)

Critical Thinking: analyzes complex concepts, issues, and problems by identifying critical components and their relationships
(Low) 1 2 3 4 5 6 7 (High)

Creativity: develops new approaches, novel ideas, and imaginative solutions
(Low) 1 2 3 4 5 6 7 (High)

Interpersonal Relationships: works collaboratively and cooperatively with others
(Low) 1 2 3 4 5 6 7 (High)

Leadership: has vision for future; inspires confidence and is respected by others; takes initiative in group work
(Low) 1 2 3 4 5 6 7 (High)

Overall Rating of Applicant: overall rating as compared to other master's applicants in nursing
(Low) 1 2 3 4 5 6 7 (High)

Signature: _____ Date: _____

Title: _____ Organization: _____