FOR COMPLETION BY APPLICANT:

Please complete the applicant information requested below before delivering this form to the individual you have selected as a reference. The individual you have chosen for our reference is to complete the remaining information, place the completed form in a sealed envelope, then sign the envelope on the outside over the seal, and return it to you. You should then submit the sealed reference with your admissions packet by the postmark deadline.

Date of Birth: _____________________________

Applicant Name: ____________________________  ________________________  ____________________

Last          First                            Middle

WAIVER STATEMENT

I hereby freely and voluntarily waive my rights of access to any information contained on this reference form and agree that the statement shall remain confidential.

Applicant Signature: _______________________________________________ Date: __________________

FOR COMPLETION BY REFERENCE WRITER:

Please return this completed reference form directly to the applicant in a sealed envelope (with your signature across the seal). The applicant will then include the sealed envelope with his/her application packet. This reference will be considered a confidential communication between you and Western University. Thank you for your cooperation.

1. How long have you known the applicant?      From _____________________  to ____________________

Date                        Date

2. Relationship to applicant (check all appropriate boxes)

_____ Employer     _____ Faculty   _____ Supervisor   _____  Professional Colleague

_____Other, please specify: _____________________________________________
3. Please evaluate the applicant in terms of the following characteristics by checking the appropriate boxes. Your evaluation should be based on observed performance.

<table>
<thead>
<tr>
<th>School Performance/Work Record</th>
<th>Not Observed n/a</th>
<th>Excellent Upper 10%</th>
<th>Good Upper 25%</th>
<th>Average Upper 50%</th>
<th>Below Average Lower 50%</th>
<th>Poor Lower 25%</th>
<th>Unacceptable Lower 10%</th>
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</thead>
<tbody>
<tr>
<td>Initiative &amp; Decision Making</td>
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<td>Judgment &amp; Critical Thinking</td>
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<td>Rapport with peer group/co-workers</td>
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<td>Oral Communication</td>
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<td>Writing Skills</td>
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<td>Competency as a Registered Nurse</td>
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<td>Leadership</td>
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</table>

4. In your opinion, what are the applicant’s major:
   
   A. Strengths: ________________________________________________________________
      ________________________________________________________________
      ________________________________________________________________

   B. Weaknesses? ____________________________________________________________
      ________________________________________________________________
      ________________________________________________________________

5. What intellectual and ethical characteristics does this person display that are necessary for graduate level education?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

RECOMMENDATION:

_____ Recommended       _____ Strongly recommend

_____ Do not recommended       _____ Recommend with reservation

Please Print Clearly

Name: _______________________________ Position: _______________________________

Institution/Organization: ______________________________________________________

Phone Number: (       ) __________________________ E-mail Address: __________________

Mailing Address: ______________________________________________________________

Signature: _______________________________ Date: ______________________________