Request for Reference Form
Revised 9/08

Applicant Name: ___________________________________________

Reference Name:____________________________________________

From: School of Social Work
Admission Committee
Campus Delivery 1586
Fort Collins, Colorado 80523-1586

The person identified above has applied for admission to the Master of Social Work (MSW) program at Colorado State University and has given your name as a person who could provide a letter of reference. The special nature of this program makes it desirable that we select academically capable students who have the basic abilities and experience to work effectively with people and/or communities. Your evaluation will be an important factor in helping us make an admissions decision. Thank you for providing us with your thoughtful contributions to our admissions process.

Please rate this applicant relative to her/his peers – and/or other potential students -- using the following numbered scale. (As a general notion to assist you in your rating, “Superior” might be viewed as roughly equating with the top 10% of the peer group and “Marginal” with the lowest 10%.)

1 = Superior       4 = Below average
2 = Above average  5 = Marginal
3 = Average        NR = Not rated / Not able to judge

1. Overall academic ability ____
2. Written communication skills____
3. Oral communication skills ____
4. Ability to conceptualize ____
5. Ability to develop positive helping relationships _____
6. Ability to use creativity in problem solving____
7. Strength of motivation for helping others____
8. Ability to make mature judgments in practice situations _____
9. Commitment to human services____
10. Ability to work with diverse populations _____
11. Commitment to social work as a helping profession as compared to other helping professions____
12. Commitment to generalist social work practice _____
13. Maturity ____
14. Emotional stability _____

(Over)
How long and in what capacity have you known the applicant?

Please include a letter on your professional/business letterhead and address the characteristics of this applicant that you think might be helpful for us to know in arriving at an admissions decision. Please feel free to include comments about any of the areas included in the checklist as well as any other information you think might be helpful (e.g., resourcefulness, sensitivity, ability to establish positive helping relationships, ability to make professional judgments in practice situations). We are also interested in your suggestions concerning specific areas of professional growth that you view as particularly important for this particular candidate. If you were the applicant’s employer, please indicate the approximate number of hours he/she spent in the position.

Date completed    Signed

Printed Name    Daytime Phone

Title and Organization

Address

Authorization for Release of Information

This is to authorize the School of Social Work at Colorado State University to contact the references I have submitted should additional information be desired.

Please indicate below which option you prefer (check only one):

Option A _____ I agree that this information may be kept as a confidential part of my admission record. **This means that I will have no access to this letter at a later date.**

Option B _____ I retain the right, afforded by the Family Educational Rights and Privacy Act, to see any material sent by these references, if I so request.

Applicant's Signature ____________________________________________________________

Address ___________________________________________________________________

Date    _________________________

**Note to Applicants**: Please mail reference forms directly to your references. The reference should then send the forms directly to you, with self-addressed stamped envelopes provided by you, sealed and signed across the sealed flap to you, to be included in your application materials.