Letter of Recommendation Form for Graduate Admission

Instructions to the Applicant
Complete the top portion of this form and give it to the person providing your recommendation.

Applicant's Name:

Address (Street, City, State, Zip Code):

Semester for which you are applying:

I have submitted an application for admission to the Gayle Greve Hunt School of Nursing. I understand that this recommendation is confidential and will not be released to either myself or to a third party, and will be used only in the evaluation of my application.

Instructions to the Recommender
This individual is applying for admission to the Gayle Greve Hunt School of Nursing Master of Science in Nursing Program. The admissions committee is interested in your candid appraisal of the applicant's potential for success in a graduate program, specifically by assessing the applicant's ability to complete graduate academic requirements, your thoughts on the applicant's leadership ability within the professional environment, and how the applicant's attributes may further enhance the professional nursing community and the patients it serves. Thank you.

Name:

Title:

This form along with the letter of recommendation should be e-mailed to the Gayle Greve Hunt School of Nursing Office of Student Affairs using the following address:

GGHSON@ttuhsc.edu

How long have you known the
applicant?

In what capacity have you known the
applicant?

Please rate the applicant on each of the following:

Academic ability

Analytical skills and conceptual thinking

Oral communication

Written communication skills

Leadership ability or potential

Clinical nursing competence

Practice inquiry ability

Effective collaboration with other members of the health care team

Character and integrity

Acceptance and use of constructive feedback

TOTAL (out of 30 points):

Admission to the MSN program at the Gayle Greve Hunt School of Nursing is: