REFERENCE FOR ADMISSION — GRADUATE PROGRAMS

Three recommendations from professional or academic sources are required as part of your application. Please complete the Applicant Section before your reference completes the Reference Section (both sides). Questions should be directed to the Pamela Heffner at 215.489.4469 or pamela.heffner@delval.edu.

Please print or type. All se	ctions are required.
APPLICANT SECTION	
Name of Applicant	
RECOMMENDER SECT	TION
Name of Recommender	
Title or Position	
Employer	
Work Address	
City, State, Zip	
Telephone	
Email Address	
Years associated with the applicant	
In what capacity	
do you know the applicant?	

PROFESSIONAL ESTIMATION OF APPLICANT

We would appreciate your professional estimate of the applicant's scholastic ability and personal characteristics. This will assist in determining the applicant's aptitude for graduate study and future career potential. How do you rate the applicant in the qualities listed below? Please place an "X" in the appropriate category.

Scholastic Abilit	ty
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	Top 5% Exceptional	Top 10% Outstanding	Top 20% Superior	Top 50% Average	No Opportunity to Observe
Observation	,	-		J	
Oral Expression					
Written Expression					
Intellectual Curiosity					
Ability to Integrate Information					
Ability to Work Independently					
Promise for Research					
Rigor of Thought					

Personal Characteristics

	Top 5%	Top 10%	Top 20%	Top 50%	No Opportunity
	Exceptional	Outstanding	Superior	Average	to Observe
Leadership					
Dedication to Goals/Objectives					
Maturity					
Self-Confident					
Responsible					
Flexible					
Cooperative					
Persistence					

In order for Delaware Valley University to consider the applicant for admission, we request you elaborate on the candidate's leadership strengths and weakness:

Referrer Signature
Date

Please upload to the <u>Recommendation Invitation</u> email or return to:

Delaware Valley University—Graduate Programs 700 East Butler Avenue, Doylestown, PA 18901 pamela.heffner@delval.edu