



Letter of Reference
Master of Social Work Program
Graduate Center: Admissions

To be completed by the Applicant:

Please provide each of your three references with a copy of this form, together with an envelope addressed to Azusa Pacific University. Please collect and return all your references in sealed envelopes (signed across seal) with your complete application package to Graduate Center Admissions, Azusa Pacific University, P.O. Box 7000, Azusa, CA 91702.

Name of Applicant (please print): _____

In accordance with the Family Education Rights and Privacy Act of 1974, I give permission to release confidential information for the purpose of application to the Master of Social Work Program.

Important: (check one) I do , do not waive my right to review this letter of reference.

Signature: _____ Date: _____

To be completed by the Reference:

The above-named person is applying for admission to the Master of Social Work Program at Azusa Pacific University, Azusa, California. Your assessment of the candidate will be of assistance to the Admissions Committee. Please complete this form, place in a sealed envelope, sign across the envelope seal, and return to the applicant, who is responsible for submitting the reference form along with other admissions materials. Thank you for your assistance.

1. How long and in what capacity have you known the applicant? _____

2. What characteristics or qualifications does the applicant have that would contribute to his/her success in the practice of professional social work? _____

3. What are the applicant's academic/professional strengths and weaknesses? _____

4. Please include any other comments. Feel free to attach a letter in lieu of completing this section.

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Please rate the applicant relative to other students or employees whom you have known in the same field in recent years (check rating that best describes Applicant).

Area of Performance	Exceptional	Superior	Good	Average	Below Average	Not Observed
Academic performance						
Commitment to becoming a professional social worker						
Maturity/responsibility						
Oral communication skills						
Written communication skills						
Ability to analyze a problem and formulate a solution						
Ability to treat everyone with dignity and respect						
Leadership potential						
Self-discipline						
Follow through on tasks						
Emotional stability						
Ability to work with others						
Personal integrity						
Ability to adapt to new situations						

What is your overall recommendation of the applicant?

<input type="checkbox"/> Highly recommend <input type="checkbox"/> Recommend <input type="checkbox"/> Not recommended	<input type="checkbox"/> Recommend with a few reservations: (list below)
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Signature: _____ Date: _____

Name (please print): _____ Position: _____

Business/Organization: _____

Business Address: _____

Telephone: (_____) _____ Email: _____