

## CONFIDENTIAL REFERENCE FORM

[Applicant's Name] \_\_\_\_\_ is applying for admission to the Master in Nutritional Sciences at Delaware State University.

Evaluator Name: \_\_\_\_\_

Organization if applicable: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Please be candid in your response:**

How long have you known the applicant? \_\_\_\_\_

In what capacity do you know the applicant? \_\_\_\_\_

Would you select this student for graduate school admission? \_\_\_\_ Yes \_\_\_\_ NO

Why? \_\_\_\_\_

**Please rate the applicant compared to other college students:**

CHARACTER AND ABILITY	Excellent	Good	Average	Fair	Poor	Not observed
Intellectual Aptitude						
Communication Skills						
Work Quality						
Creativity						
Leadership						
Maturity						
Professionalism						
Adaptability						
Ability to Work with Others						
Dependability						
Helpfulness						
Initiative						
Organizational Skills						
Attitude						
Punctuality						
Responsibility						
Stress Management						

**Evaluator Recommendation for Graduate Admission:**

\_\_\_\_\_ Highly Recommend

\_\_\_\_\_ Recommend

\_\_\_\_\_ Recommend with Reservations

\_\_\_\_\_ Do not Recommend

**Please provide additional comments about the applicant:**

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**Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The Department of Human Ecology appreciates your evaluation of the applicant.

Please return the evaluation to the student in a sealed envelope with your signature across the seal or email to the department chair: [sbesong@desu.edu](mailto:sbesong@desu.edu). The applicant will not view the reference form you submit.