

MONMOUTH UNIVERSITY

Athletic Training Program

ATP Admissions

ATP REFERENCE FORM

Name of person giving reference: _____

Employer of person giving reference: _____

Job title of person giving reference: _____

This section to be completed by applicant prior to sending to reference respondents:

The Family Educational Rights and Privacy Act of 1974 and its amendments guarantee students access to their educational records. Students may, however, waive their right of access to recommendations. The choice of the applicant regarding this recommendation is to be indicated below. Failure to sign will constitute acceptance of limited access.

- I waive my right to inspect the contents of the following recommendation.
- I do not waive my right to inspect the contents of the following recommendation.

Signed

Date

To the reference/recommendation provider:

_____ (applicant's name) is applying for admission to the Master of Athletic Training program at Monmouth University. Along with other materials, your responses on this form will be carefully evaluated by the admission committee of the Athletic Training Program. Please place the completed form in an envelope, seal the envelope, sign your name across the seal, and return the sealed envelope to the applicant, who will submit it to the admission committee. Thank you for assistance.

KNOWLEDGE OF THE APPLICANT

1. Approximately how long have you known the applicant? Years _____ Months _____
2. In general, how well do you know the applicant? Casually Well Very Well
3. In what capacity/capacities have you known the applicant? Please describe:

EVALUATION OF THE APPLICANT

1. Please rate the applicant on each of the following indicators:

	Poor	Below Average	Average	Excellent	Superior	Not Applicable
Intellectual ability	1	2	3	4	5	NA
Writing ability	1	2	3	4	5	NA
Oral expression	1	2	3	4	5	NA
Demeanor under stress	1	2	3	4	5	NA
Problem-solving skills	1	2	3	4	5	NA
Motivation to work	1	2	3	4	5	NA
Ability to work with others	1	2	3	4	5	NA
Resourcefulness	1	2	3	4	5	NA
Emotional maturity	1	2	3	4	5	NA

2. Please elaborate on your ratings from the previous section and provide a rationale for what you see are the candidate's top three (3) strengths.

3. Please elaborate on your ratings from the previous section and provide a rationale for what you see are the candidate's top three (3) areas of weakness and their ability to improve in these areas.

4. Briefly describe, to the best of your ability, the applicant's character and temperament.

5. To your knowledge, does the applicant have any special needs that should be considered by the admission committee?

SUMMARY EVALUATION

- I recommend the applicant for admission to the athletic training (AT) program without reservation. I am confident that she/he will do well in graduate study.
- I recommend the applicant with some reservations about her/his ability to perform well in the AT program. I believe the applicant's qualifications for graduate study are marginal but feel that she/he may do well with sufficient support and encouragement.
- I do not recommend the applicant for admission.

Additional comments:

Return to:
Office of Admission Processing
Monmouth University
400 Cedar Avenue
West Long Branch, NJ 07764-1898