REFERENCE FORM: COMPLETE AND RETURN TO APPLICANT. PLEASE TYPE OR PRINT

**APPLICANTS NAME**

(Last) ______________________________________________________________________

(First) _____________________________________________________________________

(Middle/Maiden) ______________________________________________________________________

**CATEGORY:**

YEAR____ ADVANCED STANDING_______ FULL-TIME____ PART-TIME____

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. I do ( ) I do not( ) waive my right to review this letter of reference.

Signature_________________________________________ Date_____________________________

TO BE COMPLETED BY THE REFERENCE:

The above named is applying for admission to the Master of Social Work Program at California University of Pennsylvania. Your assessment of the applicant will assist the MSW Admissions Committee.

I. How long and in what capacity have you known this applicant?____________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

II. Personal and professional appraisal: (please compare with graduate professionals or other students you have known)

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<thead>
<tr>
<th>Characteristics</th>
<th>Superior</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>Inadequate Knowledge</th>
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</thead>
<tbody>
<tr>
<td>1. Intellectual capability</td>
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<td>2. Academic performance</td>
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<td>3. Ability to assume responsibility</td>
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<td>4. Ability to communicate orally</td>
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<td>5. Ability to communicate in writing</td>
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<td>6. Relates well to others</td>
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<td>7. Ability to adapt to new situations</td>
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<td>8. Leadership capabilities</td>
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<td>9. Ability to utilize criticism</td>
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<td>10. Creativity</td>
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<td>11. Professional potential</td>
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<td>12. Self Discipline</td>
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</table>
III. Comments. Please add description and evaluative comments that will assist in providing a complete picture of the applicant’s abilities and potential as a graduate student and social worker.

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

IV. Please indicate strength of your overall endorsement by placing an “X” along the scale:

__Highly Recommended  __Recommended  __Recommended with Reservations  ____Not Recommend

Additional Comments:
___________________________________________________________________________________

___________________________________________________________________________________

Signature__________________________________________Date_____________________________________

Print Name__________________________________________Phone____________________________________

Position____________________________________________

Respondent return to applicant

Applicant, please collect all references, official transcripts and mail along with the personal professional statement and MSW Application form to:

California University of Pennsylvania
MSW Program-Box 90
250 University Avenue
California, PA 15419-1394

April 1, 2009