SOUTHERN CONNECTICUT STATE UNIVERSITY
School of Graduate Studies
Department of Social Work, MSW Program

LETTER OF RECOMMENDATION

**APPLICANTS ARE RESPONSIBLE FOR SENDING THIS FORM TO THEIR
RECOMMENDERS TO BE UPLOADED WITH THEIR RECOMMENDATION LETTER-THIS
FORM MUST ACCOMPANY EACH LETTER OF RECOMMENDATION**

Statement concerning ____________________________________________

(Name of applicant)

1. In what capacity and for how long have you known the applicant?

____________________________________________________________________________

____________________________________________________________________________

2. Please use the 1-5 scale to evaluate this applicant on the following attributes:

   (1-Below average; 2-Average; 3-Good; 4-Very good; 5-Superior; 0-Unable to comment)

<table>
<thead>
<tr>
<th>Attribute</th>
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<th>3</th>
<th>4</th>
<th>5</th>
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<td>Analytic Ability</td>
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<td>Capacity to express ideas orally &amp; in writing</td>
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<td>Interpersonal skills</td>
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<td>Ability to be self-aware</td>
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<td>Sensitivity to others</td>
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<td>Aptitude for understanding/helping others</td>
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<td>Adaptability</td>
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<td>Judgement</td>
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<td>Creativity</td>
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<td>Integrity</td>
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<td>Commitment to social work values</td>
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<td>Respect for difference/diversity</td>
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<td>Ability to effectively communicate</td>
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<td>Willingness to accept direction</td>
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3. Please comment on the unique strengths of this applicant and the areas in which the applicant needs further improvement and growth.

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4. Overall Evaluation:

_____ Highly recommend       _____ Recommend with reservations

_____ Recommend             _____ Do not recommend

Name and title of reference writer

___________________________________________________________

Signature ___________________________ Date __________________