



College of Health and  
Human Services  
Governors State University  
Social Work Curriculum  
LETTER OF RECOMMENDATION FORM

I voluntarily waive my right of access to this recommendation (under Public Law 93-380) so that it may be kept confidential.

*(Signature of Applicant)*

If no waiver is signed, Public Law 93-380 permits the student to inspect this recommendation.

**To be completed by applicant**

Name \_\_\_\_\_

**(Please Print)**

Applicant: Fill in the above and give to the person writing the recommendation. This recommendation **must** include at least one former instructor. The second person may be an employer or academic advisor.

**To be completed by evaluator**

The person named above is applying to the Bachelors in Social Work Curriculum in the College of Health and Human Services.

How well do you know the applicant?  Very Well  Fairly Well  Minimally

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

Identify the capacities in which you have been associated the with applicant:

Classroom Instructor  Employer  Other \_\_\_\_\_

(Please specify)

**Please rate the applicant on the following points by entering a check (✓) in the appropriate columns.**

	Exceptional	Superior	Good	Average	Below Average	No Basis for Judgement	
							COMMENTS
COMMUNICATIONS							
Oral							
Written							
ACADEMIC PERFORMANCE							
INTELLECTUAL ABILITY							
MOTIVATION/INITIATIVE							
INTERPERSONAL RELATIONS							
MATURITY							

In addition to the rating on the front, please give your evaluation of applicant in areas which we believe are important to effectiveness as a professional social worker. Faculty are particularly interested in your evaluation of the applicant's potential for success in the Social Work baccalaureate degree program. Please assess the applicant's academic and professional promise in the context of such personal qualities as intelligence, maturity, emotional stability, sound judgement, problem-solving, accountability, etc. Comparison of the applicant to others you have known in social work education or employment would be welcome.

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Among approximately \_\_\_\_\_ students I have known in this field, I would rank this applicant in the upper \_\_\_\_\_%.

My recommendation to the Bachelors of Social Work Program is:

Very Strong    Moderate    Marginal    I do not recommend

Please print your name: \_\_\_\_\_

Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Institution: \_\_\_\_\_

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

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

**Please send completed form to:**

Admissions Office  
Governors State University  
1 University Parkway  
University Park, IL 60484-0975