



Charles R. Drew University of Medicine and Science

TO THE RECOMMENDER: This applicant is submitting an application for admission into the graduate studies program at Charles R. Drew University of Medicine and Science and has requested that your evaluation be included as part of the information on which the selection committee will base its decision. We are encouraging applications from individuals who possess intellectual and interpersonal qualities that are essential for securing professional opportunities in the graduate program. We encourage your candidness in providing an honest and thorough evaluation of the applicant.

Recommendation letters & forms received by Charles R. Drew University of Medicine and Science are the property of the University. They are confidential and will only be reviewed by the Office of Enrollment and faculty on the academic department Admissions Committee.

Please type or print the following:

Applicant Information:

Applicants Full Name: _____

Program Applying To: _____

Recommender Information:

Recommender Name: _____

Title: _____

Organization: _____

Telephone: _____ **Email Address:** _____

Address: _____

City: _____ **State:** _____ **Zip code:** _____

1. How long have you known the applicant and in what capacity? (use additional sheets if needed)

2. Do you consider the applicant's achievements thus far to be a true indication of his/her ability?
Please explain. (use additional sheets if needed)

3. Personal & professional appraisal: (please check the appropriate box for each category).

	Very Strong	Strong	Average	Below	N/A
Intellectual Capability					
Leadership Potential					
Ability to work well with people					
Ability to work independently					
Initiative/Self-Discipline					
Maturity					
Interpersonal Skills					
Analytical Skills					
Communication Skills					
Writing Skills					
Verbal Skills					
Computer Skills					

4. Please note any strengths and/or weaknesses as well as academic and/or professional achievements of the applicant and his/her potential for succeeding in a rigorous academic environment and as a healthcare professional. (use additional sheets if needed)

5. Do you recommend the applicant for admission to Charles R. Drew University of Medicine & Science?

Strongly Recommend	Recommend	Recommend with Reservations	Do not Recommend

Signature _____ Date: _____