## UNIVERSITY OF CALIFORNIA DAVIS HEALTH SYSTEM

Department of Pathology and Laboratory Medicine School of Clinical Laboratory Science

## **Letter of Recommendation**

**Application Deadline Date:** 

**January 1 (Fall Class) or September 1 (Spring Class)** 

	Please send letter to:	Sharon Wahl, CLS CLS Training Program Director Pathology, UC Davis Health System, Specialty Testing Center 3740 Business Drive Sacramento, CA 95820 e-mail: Sharon.Wahl@ucdmc.ucdavis.edu					
A.	To be completed	by CLS trainee applicant:					
	Applicant:	Name Address e-mail Phone					
В.	•	Name  Title  Address e-mail Phone  f this form is to be completed by the evaluator. The contents of this letter will be onfidence from unauthorized individuals. Please do not return to the applicant.					
	Familiarity with applicant (how known, how long, and how well known?)						
	particularly (1) sp ability to do indep	ease include in this section all pertinent information you have regarding the applicant, ecial strengths and weaknesses, (2) any anomalous aspects of applicant's academic record, (3) endent work, (4) extracurricular activities including employment. This section is invaluable applicants where all else appears equal. Please append additional sheets if necessary					

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3.	If you were responsible for assigning the final grade for one or more academic programs in which the applicant participated,
	please provide a breakdown of the distribution of grades awarded and show the candidate's class standing for each course in
	the boxes below.

COURSE TITLE	Class Size	# A's awarded	# B's awarded	# Other awarded	Applet Rank	Applet Grade

4. **STUDENT PROFILE**: Please select one number for each attribute. 5 shows outstanding ability, 1 shows definite weakness. A score of 3 indicates average ability and a minimal level of performance.

Attributes	5	4	3	2	1
Reliability (intellectual and personal integrity, promptness, conscientiousness)					
2. Emotional Control (self-control, judgment, consistency, maturity, dependability)					
3. Social values (sensitivity to needs of others)					
4. Industry (drive, initiative, work habits performance)					
5. Personality (manners, courtesy, tact, poise)					
6. Laboratory skills					

7.	SUMMARY OPINION: Please check the box in front of the category in which you would place this applicant regarding
	his/her <i>overall suitability</i> as a clinical laboratory scientist trainee.

	/.	Outstanding. A person who appears only once every few years.
	6.	An excellent applicant. In the upper 10% of applicants I have known.
	5.	Well above average. In the upper 1/4 of applicants I have known.
	4.	Above average.
	3.	Average.
	2.	Slightly below average. Should be able to complete work in Clinical Laboratory Science.
	1.	Well below average. Not recommended.
	Please state v	what group the applicant is compared to:
Signati	ure:	Date: