## THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON SCHOOL OF HEALTH PROFESSIONS DEPARTMENT OF PHYSICAL THERAPY t-DPT Program

## CONFIDENTIAL RECOMMENDATION

are a	has a ch online Post-Professional D sked to respond to the following tial for this clinical doctoral deg	PT pro g. Your	gram.	As a re	eferenc	e in su	pport of th		ou
Nam	e of person completing this form	ı:							
Your	profession and position (if appli	cable):							
How	do you know the applicant?								
 Durin	g what period have you known to		icant?						
	uctions: Please rate the applicate priate number and writing a cor					ght area	as by circli	ng the	
	excellent, 4 = Above average, 3 : rtunity to observe.	= Avera	ge, 2 =	Below	averaç	ge, 1 =	Poor, 0 =	no	
1.	Attitude and Personality: Mannerisms, disposition, ability to work with people, confidence, acceptance of criticism.	5	4	3	2	1	0		
Com	ments:								
2.	Reliability and Character: Dependability, willingness honesty, moral character.	5	4	3	2	1	0	-	
Com	ments:							_	

3.	Personal Appearance: Cleanliness, grooming appropriateness.	5	4	3	2	1	0
Comi	ments:						
4.	Work Habits and Industry: Conscientiousness, following through, resourcefulness, self- discipline, initiative.	5	4	3	2	1	0
Comi	ments:						
5.	Emotional Stability: Reaction to stress, poise, control, inspiring confidence.	5	4	3	2	1	0
Comi	ments:						
6.	Capacity for Independent Thinking: Leadership ability, creative thought, curiosity.	5	4	3	2	1	0
Comi	ments:						
7.	Judgment and Common Sense: Ability and foresight in every- day decisions, expression of opinion, maturity, problem solving.	5	4	3	2	1	0
Comi	ments:						
8.	Oral Expression: Clarity, coherence, and confidence in conversation.	5	4	3	2	1	0
Comi	ments:						
Upon	completion of this form, please re t-DPT Program SHP/Department of Physi The University of Texas M	cal Th	erapy				

301 University Blvd. Galveston, TX 77555-1144 FAX: 409.747.1613