

Master of Social Work Program

Letter of Recommendation

To the Applicant
10 the Applicant
Please complete the top section of this form. Complete the waiver if you wish to waive access to this recommendation letter. You should then deliver this form directly to the individual who is familiar with your potential and aptitude for success in social work. A total of three letters of recommendation are required: one must be from a human service professional. We recommend that another be submitted from an academician, and one can come from a selected individual of your choice, including, but not limited to an employer, a university professor, or another human service professional. Recommendations from fellow applicants, personal friends, or family are not acceptable.
Name of Applicant:
Social Security Number (Optional):
Name of Recommender:
Check One: Univ. Prof/Acad. Advisor Hum.Serv. Prof Selected Individual
In accordance with the Family Education Rights and Privacy Act of 1974 (Public Law 93-380), I understand that I may choose to waive my right to review this letter of recommendation. This waiver is effective insofar as the recommendation is used solely for the purpose of admission. The university does not require that you make such a waiver as a condition for admission. I hereby waive my right of access to this recommendation and agree that this information shall remain confidential.
Signature:Date:

To the Recommender

The above-named applicant is applying for admission to the Master of Social Work (M.S.W.) program at Governors State University. Please complete the following information below and then provide your candid assessment of the applicant's characteristics and potential for advanced professional social work. (See reverse for instructions for completing your assessment of personal qualities.) After completing this letter of recommendation, please place it in the envelope provided, seal the envelope and sign your name over the seal. Return the sealed envelope to the applicant for submission of the completed application packet.

Name:	Date:	_
Organization:		_
Position/Title:	Phone:	_

In v	In what capacity have you known the applicant?									
			Fo	or how lo	ng?					
	on a scale of 1-5, with 5 being the number.	highest	, indicat		vel of red	commend				
wit soc	our assistance in helping us malith your perspective of the application or the second in the second	icant's	profess	ional cha	ıracteris	tics and	potential as an advan	nced professional		
im _j vid	elow are characteristics we requ nportant that you address each ide headings for each of the char ant. Please attach your assessme	of the f racteris	five (5) of the stics in	characte bold follo	ristics as owed by	thoroug your des	hly as possible. We a	sk that you pro-		
a.	Assess the applicant's employment or volunteer experience serving the needs of vulnerable, oppressed, or atrisk populations. Present how the applicant has demonstrated a commitment to serving vulnerable, at-risk, or oppressed populations.									
b.	Describe the characteristics of the applicant that you think provide evidence for the potential to become an effective advanced social work professional. Among these, please include your assessment of the applicant's interpersonal skills and the ability to work with others as well as the applicant's potential for growth and self-evaluation.									
c.	Evaluate the applicant's sensitivity to diversity and the ability to interact comfortably with persons who are different from her or him, e.g., social class, gender, sexual orientation, race.									
d.	Describe how you think the applicant displays personal values and attitudes consistent with social work professional values . Please include how the applicant has exhibited ethically responsible behavior and reasonable judgments.									
e.	e. Please relate the applicant's potential to successfully complete graduate study in social work by assessing their intellectual potential, oral and written communication skills, and the ability to think critically.									
Sig	ignature:						Date:			