

Applicant:

HOLY NAME MEDICAL CENTER SCHOOL OF NURSING

690 Teaneck Road
Teaneck, New Jersey 07666

201-833-3005

www.schoolofnursing.info
school@mail.holyname.org

REFERENCE No. 1 (of 2)

(ONLY THIS FORM WILL BE ACCEPTED)

APPLICANT INSTRUCTIONS: Please list the name, address, title and relationship of your reference, and indicate your preference under the "Right to Know" provision **before** forwarding this form to your reference. **Your reference should forward** the completed form directly to the Holy Name Medical Center School of Nursing at the address above.

"RIGHT TO KNOW"

In keeping with the *Family Education Rights and Privacy Act*

☐ I retain ☐ I waive
my right of access to this reference.

Applicant's Signature

Date

Name of Reference: _____ Title: _____

Address: _____

In what capacity has the reference known you? _____

TO: Person serving as Reference
FROM: Registrar
Holy Name Medical Center School of Nursing

We would appreciate your assistance in considering this applicant's candidacy for admission and promptly returning this form to us. Access to this material is restricted to the Admissions Committee and to the applicant unless he/she waived their right under P.L. 93-568, as indicated above. In assessing the applicant's aptitude for the field of nursing, please frame his/her qualifications for professional education in the context of the following questions:

- 1. How long have you known the applicant and in what capacity?**
- 2. What do you know about his/her personality and capacity to adjust and work with other people?**

3. From your own observations, what do you know of the applicant's character, standards and ideals?
4. How would you evaluate the scholastic standing and study habits of the applicant and his/her ability to pursue nursing as a career?
5. Inasmuch as nursing requires considerable physical and emotional stamina, we would appreciate your observations on the applicant's ability to do hard work, and his/her capacity to withstand the emotional strain.

Additional comments:

Date

Signature of Person Providing Reference

Please accept the Committee's gratitude for your assistance.