## SUPPLEMENTAL INFORMATION TO LETTER OF RECOMMENDATION FOR APPLICATION TO GRADUATE **CLINICAL** PSYCHOLOGY PROGRAM

INSTRUCTIONS TO APPLICANT: Please complete all of the items in this box before submitting the form to the person whom you have chosen as a respondent.					
In accordance with the provisions of the Family Education Rights and Privacy Act of 1974, P.L. 93-380 (as amended), with specific reference to Section 438 (a) (1) (B) and Subtitle A, sections 99.7, 99.11 and 99.12					
NAME:					
	(Last)	(First)	(Middle)		
DO	DO NOT	waive my right of access to and review of th	e recommendation I am	requesting.	
NOTE: if you check DO the recommendation will be confidential; if you check DO NOT the recommendation is NOT confidential.					
Signature of Student:			Date:		
Name of Respondent:					

INSTRUCTIONS TO RESPONDENT: Please return this completed form to the Department of Psychology. Graduate work in clinical psychology demands not only a keen intellect but also certain emotional resources and personal characteristics. It sometimes happens that a student highly qualified in other respects is admitted to a clinical program only to find that the emotional demands exceed his or her capacities. As difficult as these judgments may be, we hope you will assist our admissions committee in this aspect of the selections process. Please rate the applicant on the basis of your own experience with other individuals with similar backgrounds and training. Thank you.

## How familiar are you with the applicant personally?

almost no personal contact

very few personal contacts

a moderate amount of personal contact

many personal contacts

extensive contact with the student - know the person very well

Please tell us in a word or phrase your evaluation of the applicant's quality regarding each of the following areas:

Ability to function under stress:			
Emotional maturity:			
Sensitivity to others:			
Awareness of own effect on others:			
Ability to view clinical issues from a scientific perspective:			

Looking ahead, would you anticipate being comfortable referring a relative or close friend to the applicant for therapy assuming this student would be fully trained by that time?

definitely not

maybe

probably a few reservations

yes - no reservations

definitely - no reservations

Additional comments would be greatly appreciated: (If more space is needed, please use reverse side.) Please mail to : Psychology Graduate Program, Department of Psychology, Stony Brook University, Stony Brook, New York 11794-2500

Signature of Respondent:

Date: