

**WEBER STATE UNIVERSITY RADIOLOGIC SCIENCES  
PERSONAL REFERENCE FORM**

Please use this form to submit information. Include full Legal Name, Address and "W" number of applicant.

In accordance with federal guidelines, please do not comment on: gender, race, national origin, age, religious beliefs, social/economic background, sexual orientation, political beliefs and handicaps.

**I. APPLICANT INFORMATION (to be completed by applicant)**

Legal Name of Applicant \_\_\_\_\_  
 Last First Middle  
 Permanent Address \_\_\_\_\_  
 Number and Street City State Zip Code  
 W Number \_\_\_\_\_

TO THE APPLICANT: The Family Educational Rights and Privacy Act of 1974 and its amendments guarantee student access to educational records concerning them. Students are also permitted to waive their rights to access to recommendations. The following signed statement indicates the applicant's wish regarding this recommendation:

I retain my right of access to this evaluation \_\_\_\_\_ I voluntarily waive and relinquish my right of access to this evaluation. \_\_\_\_\_

**II. EVALUATOR INFORMATION (to be completed by evaluator)**

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Rank or Title \_\_\_\_\_  
 Evaluator Signature \_\_\_\_\_

**III. EVALUATION COMMENTS (to be completed by evaluator)**

Please indicate the degree to which each quality is characteristic of the candidate you are rating. Respondents should rate each Characteristic independently and avoid a tendency to rate on general impressions. One characteristic might influence the rating of all characteristics.

CHARACTERISTIC	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE
Cooperation			
Initiative			
Study Habits			
Intellectual Curiosity			
Intellectual Ability			
Judgment			
Expression			
Maturity			
Personality			
Reliability			
Leadership			
Personal Hygiene			
Emotional Stability			
Ethical Standards			
Self-Understanding			
Attitude Toward Associates			
Ability to Inspire Confidence			

Strongest points:

Weakest points:

Comments:

Would you (please circle): Highly Recommend Recommend Not Recommend  
 this person be accepted into this program.

**PLEASE RETURN THIS FORM TO THE APPLICANT.** YOU MAY PUT IT IN AN ENVELOPE IF YOU SO DESIRE BUT IT IS NOT NECESSARY FOR WSU.