

Does the applicant possess any special strengths or assets which should be considered?

Does the applicant demonstrate any weaknesses which you feel would hinder his/her ability to perform effectively in a residency program?

Other comments:

Recommendations regarding admission (Please check one):

_____ I highly recommend this applicant.

_____ I recommend this applicant, but with some reservation.

_____ I recommend this applicant.

_____ I am not able to recommend this applicant.

Signature of Recommender

Date

Name (print or type)

Phone Number

Title and Affiliation

Street Address or P.O. Box

City

State

Zip Code

