

Faculty Reference Form

(Only submit one)

Student name (please print): _____

Based on your experience with the student in the clinical setting, please evaluate the student on the following items using the scale provided. Candidate eligibility is partially based on the scores provided on this form.

	<i>Very Good</i> (top 10 percent) 4 points	<i>Good</i> (top 25 percent) 3 points	<i>Average</i> 2 points	<i>Below Average</i> 0 points
Work Skills				
Organization of work				
Technical skills				
Customer service skills				
Attitude Toward Work				
Attitude toward learning new skills				
Ability to adjust to new situations				
Integrity				
Personal Qualities				
Appearance				
Dependability				

Comments: _____

What are the student's major strengths? _____

What areas need further improvement? _____

What is your overall evaluation of this student compared with others at the same level in your program?

Outstanding (4 points)
 Above Average (3 points)
 Average (2 points)
 Below Average (0 points)

Comments: _____

By: _____ Title: _____

School: _____



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