RADFORD UNIVERSITY PRE-HEALTH STUDENT EVALUATION FROM

To the student	: Please fill in the requested informatio	n in this box:		
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Name: Radford University student ID:				
Applying for admission to (type of school):				
Applying for admission in year:				
WAIVER OF STUDENT'S ACCESS TO LETTER OF EVALUATION I, the undersigned, waive any rights of access to this evaluation accorded me by the Family Education Rights and Privacy Act of 1974 as amended and as described in 20 USC 123g (A) (1) (B) & (C), and sections 99.7 and 99.12 of the Rules of the Department of Heath and Human Services (45 C.F.R. part 99). I understand that my signature will make the Radford University Pre-Health Advisory Committee Letter of Reference a confidential letter written on my behalf.				
Student Signature		Date		
OR				
I, the undersigned, do not wish to waive my rights of access to the Radford University Pre-Health Advisory Committee Letter of Reference. I understand the letter will not be confidential.				
Student Signature		Date		
You have been selected to evaluate the above student for entrance into professional school. Your evaluation and comments will be used by the Radford University Pre-Health Advisory Committee to write a letter of evaluation to be included in the student's application. The comments you provide may be included in the letter, but their source will remain anonymous. We, the Radford University Pre-Health Advisory Committee want to thank you for your careful consideration of this applicant. Your feedback will help us to better evaluate the student, prepare the committee letter, and strengthen our advising for this particular student. When you have completed this form, please send it to: Pre-Health Letters c/o Dr. Mark Cline Department of Biology P.O. Box 6931 Radford, VA 24142				
Name of Evaluator:				
Title of Position	n:			
Address:				
E-mail:			-	
Signature:	Da	nte:		

Please feel free to either complete the form below, write your own letter, or both.
1. What is your relationship to the student? In what capacity have you known them and for how long?
2. Comment on the student's intellectual ability and rank as compared with other students whom you deem their peers. If you are a faculty member, are there extenuating circumstances that might account for atypical grades?
3. Does the student follow through on assignments and pursue suggestions for additional work? With what degree of independence have they worked?
4. Work/lab/volunteer/extracurricular/shadowing activities: Does the student come to work/lab prepared? Would you trust them to work unsupervised? Describe their depth of involvement and achievement in all of the previously listed activities of which you are aware.
5. Communication skills: Assess the student's ability to communicate both in person and in writing.
6. Personal characteristics: How would you describe this student as a person? Comment on the student's maturity, emotional stability, concern for people, problem-solving skills, tenacity in reaching goals, curiosity, creativity, capacity for leadership, self-discipline, integrity.
7. Interpersonal skills: How does the student respond to criticism? How do they relate to others? Describe their capacity for collaborative work with others and attitudes toward being supervised.
8. Would you be comfortable with this student as your future health care provider?