

REFERENCE FORM

Please return when completed
directly to the applicant



Social Work Education

APPLICANT'S: Last Name	First Name	Middle Name

REFERENCE: Full Name	Title

INSTRUCTIONS TO THE APPLICANT:

Print (or type) your full name and the name of your reference above and give this 3-page form to your reference person. Your reference should return the completed reference form to you in a **sealed envelope**. The completed form is required; he/she may include a separate letter of reference if he/she wishes. It may be mailed to you [provide a **self-addressed, stamped envelope**] or hand delivered. ***The reference person must seal the envelope and sign across the flap. You MUST NOT open the envelope.***

Submit sealed references with your application packet which is due to the Department of Social Work Education by January 31, 2017. DO NOT SEND SEPARATELY.

IMPORTANT NOTICE RE: APPLICANT'S RIGHTS:

In accordance with the Family Education Rights and Privacy Act of 1974, the California Information Practice Act of 1977, and related policies and regulations, it is also understood that upon request, this letter will be made available to you (the applicant/student) for examination. If you (applicant) wish to waive this right, please sign the waiver below.

I waive the right to see or inspect this form or any statement sent to the MSW program as a result of this request.

Signature _____ Date _____

TO REFERENCE:

The above named individual has applied for admission to the graduate program in Social Work for Fall 2017 semester and listed you as a reference. The curriculum for this program is designed to prepare individuals for an advanced level social work practice which focuses on the resolution of individual and social problems from a multi-systems perspective. Students who successfully complete the requirements of this program are awarded the Master of Social Work (M.S.W.) degree.

We seek the strongest candidates to maintain the standards of our profession in the service to our community and its people. Accordingly, we firmly believe that it is unethical to admit applicants to the graduate program if their chance of successful completion is doubtful and/or if they are not suited for this professional role. Please be aware that the law requires that all student records, including letters of reference, be made available to the student for review upon request unless the student has waived these rights.

QUESTIONNAIRE:

1) How long and in what capacity have you known the applicant?

Years	Specify Capacity (Employer Instructor Field Supervisor etc.)

2)

What do you consider are the applicant's major strengths as a candidate for graduate study in social work?

3)

In what areas, and to what degree, does the applicant need to be strengthened as a potential social worker?

4)

Please Rate (✓) Your Impressions of the Applicant Using the Following Scale:	EXCEPTIONAL (top 5%)	VERY GOOD (top 10%)	AVERAGE (top 50%)	BELOW-AVERAGE (bottom 50%)	NOT OBSERVED
Level of concern and commitment to work toward social justice and the empowerment of oppressed populations					
Ability to respect and work with diverse populations (e.g., age, gender, ethnicity, class, sexual orientation, disabled)					
Sensitivity to the needs and feelings of others					
Ability to establish and maintain professional working relationships with colleagues and clients					
Ability to self-reflect and personal insight					
Willingness to accept suggestions, direction and/or supervision					
Ability to initiate action and complete tasks					
Ability to effectively communicate in writing					
Ability to effectively communicate verbally					
Ability to engage in critical thinking and applying intellectual ability					

5) Please indicate your overall recommendation regarding admission of this candidate to the MSW program:

Most Highly Recommend	Highly Recommend	Recommend	Recommend with Reservations	Do Not Recommend

- 6) **Additional Information:** Additional comments may be provided below or attached in a separate letter.
PLEASE NOTE: Any additional comments are not a substitute for completion of questions 1-5.

INFORMATION OF REFERENCE | PLEASE PRINT OR TYPE:

FULL NAME	ORGANIZATION
BUSINESS ADDRESS	BUSINESS TELEPHONE
SIGNATURE	DATE

INSTRUCTIONS TO THE REFERENCE:

References must be completed on this required form and include a current date and an original signature. A supplemental letter may be attached. Include the applicant’s full name on any additional attachments. Enclose this completed form in an envelope, seal the envelope and sign your full name across the seal. Return the completed reference documents to the applicant as soon as possible. Please do not send the reference letter directly to the Department of Social Work Education; it will not be accepted for inclusion in the applicant’s application file. The applicant has been instructed to include the sealed envelope containing this reference in his/her application packet.

The deadline for submitting the program application and supporting documentation is **January 31, 2017**. The application packet must be delivered to the Department of Social Work Education office or postmarked by 6:00 pm, January 31, 2017.

Department of Social Work Education
 Fresno State University
 5310 North Campus Drive, M/S PH102
 Fresno, CA. 93740-8019
 (559) 278-3992