

Surgical Technology
Personal Reference Form

To be completed by the Applicant:

I, _____ give permission to _____ to complete this personal reference for me.

I appreciate their candor and understand that this form is confidential. However, under Federal Law entitled the "Family Educational Rights and Privacy Act of 1974," students are given the right to inspect their records including recommendation forms.

I _____ do _____ do not waive my rights to review the content of this form. I release them from any liability regarding their completion of this form. I have supplied the person completing this form with the following information to return it to the email address below.

Connie "Crickett" Pimentel
Academic Programs Specialist
HealthSciencesGCSC@gulfcoast.edu

Completed by a person authorized to complete the Reference:

1. How long have you known this applicant, and in what capacity?

How well do you know the applicant? ____Very Well ____Fairly Well ____Slightly

2. In the healthcare field, healthcare personnel have access to confidential information from charts and files and are required to handle drugs and controlled substances. With this in mind, do you place full confidence in the applicant's integrity? Yes _____ No _____ If no, please explain:

_____ 3. Would you allow this individual to provide healthcare for you or your family if you were ill?
Yes _____ No _____ If no, please explain:

4. To your knowledge, is there anything that might interfere with or limit the success of this applicant in the healthcare field?

5. How do you perceive this person reacting when placed in a stressful situation or working under pressure?

Circle one: Wise Sensible Irrational Impractical Hysterical Other _____

6. Please indicate whether or not you recommend this applicant as being suitable to enter the Healthcare program.

Circle one: RECOMMEND WITH ENTHUSIASM RECOMMEND
 RECOMMEND WITH RESERVATIONS DO NOT RECOMMEND

Please check or write in the spaces to indicate the traits that best describe the applicant:

| | <i>Above Average</i> | <i>Average</i> | <i>Below Average</i> | <i>No Basis to Judge Applicant</i> |
|---|----------------------|----------------|----------------------|------------------------------------|
| Communication skills, clarity | | | | |
| Cooperation, team player, gets along w/ others | | | | |
| Courtesy | | | | |
| Dependability or Reliability | | | | |
| Helpful to others, motivated | | | | |
| Honesty | | | | |
| Initiative | | | | |
| Leadership ability | | | | |
| Maturity, Emotional Stability, Coping, Conflict | | | | |
| Neatness, Appearance (tidy, clean) | | | | |
| Organized | | | | |
| Perseverance, Stamina | | | | |
| Promptness (responsiveness) | | | | |
| Quality of Work, Accuracy | | | | |
| Quantity of Work | | | | |
| Responsibility | | | | |
| Seeks help when needed | | | | |
| Sound decision making | | | | |

Signature: _____

(Person Completing Reference)

Position/Title: _____

Address: _____

Phone No.: _____