



# Accelerated Bachelor of Science in Nursing (ABSN) Program REFERENCE FORM

Mailing Address:

**Concordia University Irvine**

**Attn: ABSN Admissions**

**1530 Concordia West**

**Irvine, CA 92612-3202**

**949.214.3010 [gradadmission@cui.edu](mailto:gradadmission@cui.edu)**

***To the Applicant:*** Complete the top portion of this form and give it to an appropriate professional or academic reference. Recommendations from family members and/or friends are not acceptable.

*Please type or print legibly. Note: This is not a confidential document.*

**TO BE COMPLETED BY APPLICANT:**

Applicant's name \_\_\_\_\_ Date: \_\_\_\_\_  
*Last* *First* *Middle Initial* *(maiden)*

Intended Program: **ABSN Program**      Intended Entry Term:    Summer 20\_\_\_\_     Fall 20\_\_\_\_

**TO BE COMPLETED BY EVALUATOR:**

\_\_\_\_\_ *Print Name* *Signature*

What is your relationship to the candidate: \_\_\_\_\_

How long have you known the candidate: \_\_\_\_\_

Contact address: \_\_\_\_\_

Contact phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Your title: \_\_\_\_\_

Rate the candidate in each of the following seven areas by circling the best adjective:

- |                                |                  |               |                |                 |             |                     |
|--------------------------------|------------------|---------------|----------------|-----------------|-------------|---------------------|
| 1. <i>Adaptability</i>         | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 2. <i>Communication Skills</i> | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 3. <i>Team Orientation</i>     | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 4. <i>Dependability</i>        | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 5. <i>Initiative</i>           | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 6. <i>Leadership</i>           | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |
| 7. <i>Creativity</i>           | <i>excellent</i> | <i>strong</i> | <i>average</i> | <i>marginal</i> | <i>weak</i> | <i>not observed</i> |

**To the Evaluator:** You may write directly on this sheet. However, if you prefer to use a separate sheet of paper, please make sure you use your official letterhead and attach the completed front page of this form to your letter.

Please provide a narrative appraisal of the candidate's ability to complete Accelerated Bachelor of Science in Nursing (ABSN) program.

If you were the hospital administrator and this person were to apply for nursing position at your hospital, would you hire him/her? Why or why not?