



PSYCHOLOGY GRADUATE PROGRAM
REQUEST FOR REFERENCE

MASTER OF ARTS IN PSYCHOLOGY GENERAL BEHAVIOR ANALYSIS
MASTER OF SCIENCE IN PSYCHOLOGY BEHAVIOR ANALYSIS COUNSELING

APPLICATION DEADLINE JANUARY 15, 2020
FALL 2020

Section I –To be completed by applicant. Applicant must submit this form with Department Admission Application, directly to the Department of Psychology prior to January 15, 2020, for Fall admission.

(Applicant's name) Street City State Zip Code

(Phone) Email address

I do do not waive my right to review this recommendation in accordance with the "Family Educational Rights & Privacy Act" of 1974.
Applicant's signature _____ Date _____

Section II – To be completed by the Recommender – Return this form to the applicant in a sealed envelope with your signature across the back. Applicant should submit recommendation letters with other documents directly to the Department of Psychology prior to January 15th for Fall admission.

The above named individual has applied for admission to undertake graduate studies leading to the Master's degree in Psychology, and has given your name as a reference. We would appreciate having your opinion of the applicant's capacity for graduate work.

I have known the applicant for approximately _____ months/years.

During this time he/she was a/an:

Undergraduate Student Graduate Student Advisee Other (Please specify) _____

I know him/her: Well Fairly Well Not very well

I could compare the applicant with other students of his/her level as follows:

	Exceptional	Above Average	Average	Below Average	No Information
Academic Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Express Ideas Orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the space below please add any comments you think are relevant to the assessment of the candidate.
(or attach a separate sheet)

In summary, my recommendation would be:

- Very Strong
- Strong
- Average
- No Recommendation
- Recommendation With Reservation (Please Specify) _____

Signature

Date

Type or print name

Official Position/Department

Address

Phone

Please return this form to the applicant in a **sealed envelope** with your signature across the back or mail to the **address below** to the Psychology Department to the attention of the Graduate Assistant.

To receive consideration, references must be received no later than

January 15, 2020 for Fall 2020 Admission

Psychology and Child Development Department

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