#### University of Nevada, Reno | School of Social Work, BSW Program

# **BSW Recommendation Form**

### Due by January 15<sup>th</sup>

(or the last business day before should January 15<sup>th</sup> fall on a weekend)

**TO THE APPLICANT:** Please type your full name below, along with the information requested about the individual you have asked to make the recommendation. Keep in mind that these are professional references; therefore, you should select referees who are familiar with your educational background, employment, and/or professional skills. You should not ask a family member, peer, classmate, co-worker, or friend to serve as a reference.

**TO THE RECOMMENDER:** The person whose name appears below is applying to the Bachelor of Social Work Program at the University of Nevada, Reno. He/she has requested that your recommendation be included as part of the information on which our Undergraduate Admissions Committee will base its decision. Your responses to the following questions will be very helpful to the Admissions Committee. When completed, please mail this form directly to the School of Social Work's Undergraduate Admissions Committee.

Applicant's Name (First and Last Name)		1
Name of Recommender		1
Position or Title		1
School or Firm		1
ddress City, State		Zip Code
Telephone Emai	il	
Under the Family Education Rights and Privacy Act into the program to which they apply are given the recommendation, unless they have waived their right following waiver or declining to do so. <b>Note:</b> If the a will automatically waive the right to review this letter	he right to inspect their records ght to review. Applicants have the applicant chooses not to signal the	s, including this letter of the option of signing the
☐ I expressly waive any rights I might have to a Education Rights and Privacy Act of 1974.	access this letter of recommend	ation under the Family
Applicant's Signature	Date	
☐ I do not agree to the waiver above.		
Applicant's Signature	Date	

University of Nevada, Reno   School of Social Work, BSW Program
1. In what capacity and how long have you known the applicant?
2. Please comment on the applicant's experience in the broad arena of human services.
3. What characteristics do you consider to be the major strengths of the applicant?
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What characteristics do you consider to be the major strengths of the applicant?  4. What applicant characteristics would you suggest need further development?

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5. We are interested in your assessment of the applicant's suitability for generalist social work practice. Using as a base of comparison, other individuals whom you have known in social work or related fields, please rate the applicant in the following areas:

Characteristics	Exceptional	Above Average	Average	Below Average	Well Below Average	No Basis for Judgment
Commitment to the profession of social work						
Demonstrates ethical behavior						
Demonstrates self-awareness						
Demonstrates interpersonal skills						
Verbal communication skills						
Written communication skills						
Intellectual curiosity						
Ability to accept constructive criticism						
Responsible for carrying out assignments						
Ability to take initiative						
Open to change and new ideas						
Judgment in decision making						
Demonstrates integrity						
Demonstrates emotional maturity						
Performance under stress						
Use of personal abilities in helping others						
Willingness to engage in social change						
Commitment to solving social problems						
Commitment to social work values						

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6. Please use the space b	elow for additional comments you would like to make regarding this applicant.			
<ol><li>Please check the box the to admission to the BSV</li></ol>	at best corresponds with your overall evaluation of this applicant with respect v program:			
☐ I do not recommend this	applicant for admission to the BSW Program.			
☐ I believe this applicant's benefit from study in the	qualifications are below average, but if admitted, the applicant would greatly BSW Program.			
• •	performance should be comparable to that of most students, and I nt for admission to the BSW Program.			
☐ I believe this applicant hat this applicant for admiss	as the capability to perform at an above average level, and I highly recommend ion.			
We greatly appreciate your assistance in our evaluation of this candidate's application for admission to the BSW Program. Thank you for sharing your observations.				
Signature of Recommen	der Date			
<b>Note:</b> The School of Social Work does not accept faxed or emailed application materials; additionally, recommendation forms must be sent directly from the recommender to the below address.				
	RECOMMENDER			
	University of Nevada, Reno			
	School of Social Work			
	BSW Admissions Committee 1664 N. Virginia Street, Mailstop 090			
	Reno, NV 89557-0090			

In compliance with federal law, including the provision of Title IX of the Education Amendments of 1972 and Sections of 503 and 504 of the rehabilitation Act of 1973, the University of Nevada, Reno does not discriminate of the basis of race, sex, religion, color, national origin, age, handicap, or military service in its administration policies, programs, or activities; its admission policies; scholarship and loan programs; athletic or other university administered programs; or employment.