



**St. Luke's Hospital Medical Laboratory Science Program  
Reference Form**

Name of Applicant: \_\_\_\_\_  
First MI Last

RELEASE OF ACCESS TO THIS RECOMMENDATION: The applicant must complete and sign the following statement before submitting this form to the evaluator. This request is in compliance with Federal Law PL 93-380, Family Educational Rights and Privacy Act of 1974.

\_\_\_\_\_ I waive my right of access to this letter of recommendation.

\_\_\_\_\_ I do not waive my right of access to this letter of recommendation.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

How long have you known the applicant? \_\_\_\_\_

In what capacity to you know the applicant? \_\_\_\_\_

How well do you know the applicant: \_\_\_\_\_ Very well \_\_\_\_\_ Fairly well \_\_\_\_\_ Slightly

**PLEASE INDICATE YOUR OPINION OF THIS APPLICANT WITH REGARD TO EACH FACTOR BY NOTING THE APPROPRIATE RATING.**

**Dependability/Attendance**

- 5 Always punctual; very conscientious and dependable; minimal absenteeism
- 4
- 3 Usually punctual; absenteeism average/acceptable; usually reliable
- 2
- 1 Poor punctuality; excessive absenteeism; unreliable
- NA Unable to evaluate

**Cooperation/initiative**

- 5 Energetic, enthusiastic; a self-starter; performs all tasks willingly and without complaint
- 4
- 3 Average enthusiasm; sometimes needs encouragement; does only what is assigned
- 2
- 1 Does just enough to get by or seldom finished a task; lazy, uncooperative
- NA Unable to evaluate

**Communication**

- 5 Communicates well with other; outgoing, positive attitude
- 4
- 3 Hesitant and sometimes uncomfortable in communicating with others
- 2
- 1 Shy, very reserved; avoids meeting and interacting with others
- NA Unable to evaluate

**Quality of Performance**

- 5 Requires minimum supervision and completes work accurately and on a timely basis
- 4
- 3 Requires some supervision and completes work accurately most of the time
- 2
- 1 Needs direct supervision to correct frequent errors
- NA Unable to evaluate

**Personal Appearance**

- 5 Displays a professional demeanor; dresses appropriately for the occasion
- 4
- 3 Generally neat and clean, somewhat more casual than preferred
- 2
- 1 Dresses inappropriately; hygiene needs improvement
- NA Unable to evaluate

**Stability/Acceptance of Criticism**

- 5 Tactful, even-tempered, tolerates pressure and accepts constructive criticism well
- 4
- 2 Sometimes frustrated and confused; usually accepts constructive criticism well
- 2
- 1 Has difficulty under stress; loses temper, especially when offered constructive criticism
- NA Unable to evaluate

**Decision-Making Ability**

- 5 Makes decisions quickly and intelligently after evaluating information
- 4
- 3 Usually makes the best decision after some thought; sometimes uncertain
- 2
- 1 Unable to set priorities; often changes mind; unsure; makes poor choices
- NA Unable to evaluate

**Honesty/Integrity**

- 5 Above reproach; truthful; readily admits mistakes and corrects them, or seeks help
- 4
- 3 Usually admits mistakes; generally seeks help to correct them
- 2
- 1 Hides errors or blames them on others; not trustworthy
- NA Unable to evaluate

**If you were responsible for accepting/hiring this applicant, you**

- 5      Would definitely
- 4      Would probably
- 2      Would with reservations
- 2      Would only as a last resort
- 1      Would not

**Has the student required tutoring, had to retake exams, or otherwise had difficulty in courses?**

\_\_\_\_\_ Yes      \_\_\_\_\_ No      N/A \_\_\_\_\_

If yes, please explain:

**NARRATIVE COMMENTS (Please state specific strengths and weaknesses that you have observed.)  
(Include a letter of recommendation if you wish.)**

Name: \_\_\_\_\_

Position \_\_\_\_\_

Email address: \_\_\_\_\_

Date \_\_\_\_\_

Return to:      Cassie Hartgrave via email at [cassie.hartgrave@unitypoint.org](mailto:cassie.hartgrave@unitypoint.org) or via post to:  
1026 A Avenue NE  
Cedar Rapids, Iowa 52402

**Please complete and return by October 1<sup>st</sup>.**