

**California State University, Long Beach  
School of Nursing  
Graduate Reference**

***\*\*please fill out and return to applicant in a sealed envelope***

\_\_\_\_\_ is applying for admission to our Graduate Nursing Program. We would appreciate your evaluation of the applicant in the following areas. Please feel free to add any comments you feel may be helpful to us. Thank you very much.

(Please note that 5 is excellent and 1 is poor. If you have not observed the applicant with a particular trait, please mark "N/A")

|                                | 5 | 4 | 3 | 2 | 1 | N/A | Comments |
|--------------------------------|---|---|---|---|---|-----|----------|
| Creativity                     |   |   |   |   |   |     |          |
| Consistency                    |   |   |   |   |   |     |          |
| Emotional Stability            |   |   |   |   |   |     |          |
| Flexibility                    |   |   |   |   |   |     |          |
| Initiative                     |   |   |   |   |   |     |          |
| Interpersonal Skills           |   |   |   |   |   |     |          |
| Logical Thinking               |   |   |   |   |   |     |          |
| Responsibility                 |   |   |   |   |   |     |          |
| Self-Directed Learning         |   |   |   |   |   |     |          |
| Sense of Humor                 |   |   |   |   |   |     |          |
| Ability to deal with Ambiguity |   |   |   |   |   |     |          |

Additional Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

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

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

Agency: \_\_\_\_\_

Date: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_