***Reference Form for Berry Students Applying to Medical School***

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**Student**

 *Complete this section of the form before submitting it to your chosen reference*

**Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Reference­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone Number of Reference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*I,* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, *chose ( to not to ) waive my right to view this completed form.*

(Student’s Name)

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date**­­\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Type name here)

**Reference Part I**

*The Berry College Pre-Medical Committee would very much appreciate your assistance in evaluating the above-named student as an applicant to medical school. Please answer the questions below, complete the form and return it to Dr. Mingone by email. If necessary, you may also mail it to the address below. Berry faculty and staff may return the form via inter-office mail.*

Christopher J. Mingone, PhD

 School of Mathematical and Natural Sciences

 P.O. Box 490430

 Mount Berry, GA 30149-5036

 Email: cmingone@berry.edu

1. How long and in what capacity have you known the student?
2. Do you have any concerns about the student’s ability to undertake medical school? If so, please explain.
3. Does the student have any specific strengths that you believe will aid them in completing medical school? If so, please explain.
4. What about the student causes them to stand out amongst their peers?
5. Give a brief overview of the student in terms of intelligence and personality?

**Reference Part II**

*Please indicate your opinion of the student’s ability in the following categories in comparison to other students you have known using the key provided. You also have the option to provide a brief description of how they demonstrate each trait. Your description will be useful in evaluating the student and writing a committee letter if recommended.*

**Key**

X – Unable to Judge 2 – Top 45% 4 – Top 15%

1 – Below top 50% 3 – Top 30% 5 – Top 5%

1. Intellectual ability X 1 2 3 4 5

Give a description or example in terms of the student’s problem solving skills, verbal communication skills, and/or writing skills. *(Optional)*

1. Motivation, commitment X 1 2 3 4 5

Give a description or example in terms of the student’s adaptability, self-awareness, and/or self-confidence. *(Optional)*

1. Performance under pressure X 1 2 3 4 5

Give a description or example. *(Optional)*

1. Ability to work with others X 1 2 3 4 5

Give a description or example in terms of the student’s empathy and concern for others. *(Optional)*

1. Maturity X 1 2 3 4 5

Give a description or example in terms of the student’s attitude towards criticism and emotional stability. *(Optional)*

1. Integrity X 1 2 3 4 5

Give a description or example. *(Optional)*

1. Leadership potential X 1 2 3 4 5

Give a description or example. *(Optional)*

**Signature of Evaluator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_**

***Please make any additional comments here.***