



## REQUEST FOR RECOMMENDATION

### Medical Laboratory Science Program

**TO BE COMPLETED BY APPLICANT:** **NAME: (Last)** \_\_\_\_\_ **(First)** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**EMAIL :** \_\_\_\_\_

I waive the right to review this recommendation. \_\_\_\_\_

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

**TO THE RECOMMENDER:** In order to expedite the application process, please return this form as soon as possible to:

Written hard copies may be mailed to: **Marietta Tomlin, Director of MLS Program**  
**The Valley Hospital, Dept. of Pathology & Laboratory Medicine**  
**223 N. Van Dien Avenue**  
**Ridgewood, NJ 07450**

Scanned copies may be sent directly from  
the recommender by email to: **mtomlin@valleyhealth.com**

Applicants to the Medical Laboratory Science Program specified above are required to have recommendations submitted by persons who are in a position to evaluate their qualifications. The recommender is asked to make a frank appraisal of the applicant's character, personality, abilities and suitability for a Medical Laboratory Science student. All comments and information provided will be kept in the strictest confidence.

**PLEASE COMPLETE:** I have known the applicant for \_\_\_\_\_ (months, years), and I know the applicant  
\_\_\_\_\_ very well \_\_\_\_\_ fairly well \_\_\_\_\_ only casually. My relationship to the applicant was (is) in the following capacity:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Guidance counselor  
Teacher  
Advisor

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Employer  
Supervisor  
Other (specify) \_\_\_\_\_

Relative to persons of similar background, training and professional interests, how would you rate the applicant for each of the following characteristics? Please place an X under the rating column which best describes the applicant.

Characteristics Evaluated	Excellent	Above	Average	Unsatisfactory	Not Applicable
Academic ability					
Written communication skills					
Verbal communication skills					
Leadership skills					
Initiative and motivation					
Assertiveness					
Willingness to cooperate					
Dependability					
Willingness to accept criticism					
Professionalism					
Emotional maturity					
Integrity					

What do you feel are the applicant's strong points?

Does the applicant have any weaknesses which you feel would hinder his/her ability to perform in a health care setting?

Other comments:

#### RECOMMENDATION CONCERNING ADMISSION:

\_\_\_\_ I highly recommend this applicant  
\_\_\_\_ I recommend this applicant  
\_\_\_\_ I recommend this applicant, but with some reservation.  
\_\_\_\_ I am not able to recommend this applicant.

Signature of Recommender : \_\_\_\_\_

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**DATE:** \_\_\_\_\_