

**UNIVERSITY OF WISCONSIN-EAU CLAIRE  
COLLEGE OF NURSING AND HEALTH SCIENCES  
Department of Nursing**

**MASTER OF SCIENCE IN NURSING (MSN) PROGRAM  
REFERENCE FORM**

I am applying for admission to the Master of Science in Nursing (MSN) program at the University of Wisconsin-Eau Claire. As part of the admission procedure, I am requesting that you submit an assessment of my abilities and personal qualities in the areas listed below.

I do \_\_\_\_\_ do not \_\_\_\_\_ waive my right of access to confidential statements and recommendations which are contained in, or are part of my educational records in the possession of, or used by the Dean or designee in the College of Nursing and Health Sciences at the University of Wisconsin-Eau Claire. This waiver can only be revoked in writing and only with respect to confidential statements and recommendations placed in my files *subsequent to* written revocation.

Type or print full name of applicant: \_\_\_\_\_

Applicant's Signature (enter initials to indicate signature): \_\_\_\_\_ Date: \_\_\_\_\_

-----

Note: The above individual is applying for admission to the Master of Science in Nursing (MSN) Program at the University of Wisconsin-Eau Claire, College of Nursing and Health Sciences. Please respond to the following questions, paying particular attention to the person's ability to succeed in a graduate program. We greatly appreciate your thoughtful consideration of the applicant's qualities.

**Please describe the capacity in which you have known the applicant and the approximate dates:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please rate the applicant, placing a check mark in the appropriate box.**

	Excellent	Very Good	Good	Below Average	Unable to Judge
1. Expertise in nursing practice.					
2. Ability to collaborate with others.					
3. Ability to be self-directive.					
4. Leadership qualities.					
5. Written communication skills.					
6. Verbal communication skills.					
7. Creativity.					
8. Ability to critically think.					
9. Ability to effect change.					
10. Ability to manage time.					
11. Integrity.					
12. Potential for graduate study.					

**Please describe the applicant's potential for graduate study, including any strengths and areas for improvement:** \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

**Please provide any additional feedback you believe will be helpful to the MSN program admissions committee as it reviews the applications:** \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

**Please indicate your recommendation:**

- Strongly recommend
- Recommend
- Recommend with reservations
- Do not recommend

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

Signature (please initial to indicate signature): \_\_\_\_\_ Date: \_\_\_\_\_

Institution or Agency and Address: \_\_\_\_\_

---

I agree to be contacted for additional reference information if needed:  Yes  No

E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE RETURN TO:** UW-Eau Claire Graduate Admissions [admissions@uwec.edu](mailto:admissions@uwec.edu)  
*Please reference the applicant's name in the subject line of the e-mail*