## ONC BOCES PN PROGRAM OTSEGO AREA SCHOOL OF PRACTICAL NURSING

31 Center Street 3<sup>rd</sup> floor Oneonta, NY 13820

Please return to the above address.

## **APPLICANT'S PERSONAL REFERENCE**

I authorize the person named on this reference to supply this information to the Otsego Area School of Practical Nursing as part of the admission process.

## APPLICANT'S SIGNATURE

DATE

(**Please print name of applicant above**) applied for admission to our school of practical nursing and has given your name as a reference. Will you kindly give us your opinion of this applicant's suitability for practical nursing? The information will be treated with confidence; however, the applicant may have access to this information under the freedom of information law.

1. Are you aware of any handicaps, which might limit the applicant's success in nursing? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please explain\_\_\_\_\_

2. If you or a member of your family were advised by a physician to employ a practical nurse during an illness, would you have enough confidence in this applicant to employ her/him <u>after graduation</u> from this course of instruction? Yes\_\_\_\_\_ No\_\_\_\_\_ Decline Comment\_\_\_\_\_

The following list has been compiled for you to check the characteristics, which you feel are most descriptive of the applicant. Check only those that you feel you can give honestly.

APPEARANCE	POOR	FAIR	GOOD	EXCELLENT
GROOMING				
POSTURE				
GENERAL IMPRESSION				
CHARACTER				
INITIATIVE				
DEPENDABILITY				
RESPONSIBILITY				
RESOURCEFULNESS				
PERSEVERANCE				
INTEGRITY				

	POOR	FAIR	GOOD	EXCELLENT			
PERSONALITY							
ALERTNESS							
COURTESY							
SELF CONTROL							
DIGNITY AND POISE							
COOPERATIVENESS							
ТАСТ							
MATURITY							
GENERAL IMPRESSION							
Please indicate whether or not you endorse the applicant as a suitable candidate for nursing: Endorse Endorse with enthusiasm Do not endorse							
Decline to comment							
Please comment on applicant's potential for nursing:							
Date Name (Please Print)							
Signature							
Address							
Address							
How long have you known this applicant and in	what capacity?						
Current Employee (in what job?)							
Previous Employee (in what job?)							
Student (in what program?)							
Other (describe)							
Hegis Code: 5209.20							