



ALAMO COLLEGES DISTRICT
St. Philip's College

Nursing Education Department

LVN/Military to ADN Mobility Program

Reference Letter Form

Section I (To Be Completed by Applicant):

Applicant Name: _____ Banner ID: _____

Name of Person Completing Reference (print): _____

Section II (Performance Rating): Please rate the applicant in comparison with other students/employees whom you have known in recent years.

| Characteristic | Unable to Judge | Below Average | Average | Above Average | Outstanding |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Academic/Scholarly Performance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motivation/Commitment to Profession | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Analytical Thinking/Potential | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Research Ability/Potential | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Expressive Communication: Oral | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Expressive Communication: Written | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership Ability/Potential | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to Work Independently | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

How do you rank the student among other students/nurses in the field?

- Top 5%
- Top 10%
- Top 25%
- Other _____



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Section III (Narrative Description):

We are most interested in your assessment of the applicant's strengths and weaknesses, professional contributions, ability to work independently, creativity, and aptitude for RN study. Does this applicant show accountability and professionalism in their character? If possible, can you provide an example. Please also indicate how long you have known the applicant and in what capacity. Do not hesitate to supply any other information you think is pertinent to this application. ***Please do not include a separate letter. Please place in the provided area. Signature required.***



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We would like to thank you for taking the time to provide a reference for this applicant. If you could provide the following information for verification purposes or questions related only to this recommendation later.

Reference Information (Printed):

| | |
|-------------------------------------|--|
| Title/Position | |
| Email Address | |
| Institution/Employer | |
| Institution/Employer Address | |
| Name (Printed) | |
| Signature | |
| Date: | |