Henderson State University Counselor Education Recommendation Form

Instructions for the Applicant: Complete this section and then give it to the re	commender.					
Name of Applicant						
Mailing Address	City	S	tate Zip code			
HSU ID #		Phone Number				
Track to which you are applying		emester for which you are pplying	Year for which you are applying			
Name of recommender						
Title of recommender		Recommender place of employment				
Address of recommender						
Recommender type						
Please check one of the following and sign be: I agree to respect the confidentiality of the I elect to retain my right to view this recon	recommendation	and specifically waive any right	of access.			
Signature of applicant						

TO THE RECOMMENDER

We wish to determine the applicant's aptitude for graduate study and potential for success in the chosen area. Your comments will be carefully considered by the admissions committee. Please place your completed recommendation in the envelope provided, seal it, sign over the seal, and return the envelope to the applicant.

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How long have you known the applicant?									
In what context?									
Please rate the applicant in the following categories:									
	Poor	Below Average	Average	Above Average	Excellent	Do Not Know			
Potential for graduate study									
Empathy									
Genuineness									
Sensitivity to diversity									
Warmth/caring									
Professionalism									
Ethics/Integrity									
In an effort to select the students with the best potential for academic and professional success, we would appreciate you making specific comments concerning the applicant's ability to engage in the following activities.									
Initiate scholarly and professional activity									
Effectively demonstrate empathy and willingness to work with others, including those of different ethnic backgrounds									
Effectively demonstrate empatity and winingness to work with others, including those of different cumic backgrounds									

Perceive and demonstrate integrity and ethical behavior		
Describe notable social skills that facilitate the development of posi-	itive relationships	
Describe any reservations you have or potential weaknesses you see	e in the applicant	
Signature of recommender		Date
Title	Firm or Institution	
E-mail Address		