



## Applicant Reference Form: Post-Baccalaureate Certificate Programs

Program: \_\_\_\_\_ Post-Baccalaureate Certificate in Integrated Healthcare Delivery  
Campus: \_\_\_\_\_ Buffalo \_\_\_\_\_ Rochester \_\_\_\_\_ Online

Please  the Program & Campus to which you are applying

Send all documents to Adult & Graduate Admissions Medaille College:

Buffalo/Online: 18 Agassiz Circle, Buffalo, NY 14214 Phone: (716) 932-2568 or (800) 292-1582

Rochester: 1880 South Winton Rd, Rochester, NY 14618 Phone: (585) 957-9367 or (866) 212-2235

Email: [AdultGradAdmissions@Medaille.edu](mailto:AdultGradAdmissions@Medaille.edu)

### Part A: To be completed by the applicant

Applicant Name: \_\_\_\_\_  
First Middle Last

Applicant Address: \_\_\_\_\_  
Street Apt/Unit #

City State/Province Zip/Postal code Country

Home Phone Work Phone Cell Phone

Email

Name of Employer: \_\_\_\_\_

Street City State/Province Zip/Postal code

Position at Company How long in this position?

Name of Person Providing Reference: \_\_\_\_\_  
Position/Title

Daytime Phone Evening Phone Email

This recommendation will be part of your admissions file. It will not be disclosed to any unauthorized individual without your consent. If you matriculate at Medaille College you will be accorded access to its contents unless you voluntarily waive your right to access. Please check on and sign the statement below.

\_\_\_\_\_ I DO waive the right to review this recommendation once submitted.

\_\_\_\_\_ I DO NOT waive the right to review this recommendation once submitted.

Signature of Applicant Date



**Part B: To be completed by the Reference**

The aforementioned applicant is applying to Medaille College’s Management & Leadership Program. The admission committee attaches great weight to an applicant’s qualifications that are not reflected in academic records. You can assist us in the evaluation of the applicant by responding frankly to this question form. Under the 1974 Family Educational Rights and Privacy Act, the applicant named above will have access to this recommendation unless he or she has waived such right. In accordance with the FEPC policies, the author of this reference is asked to refrain from commenting on illegal discriminatory criteria such as a candidate’s race, religion, national origin, political affiliations, beliefs, or activities.

The questions below are offered as a guide; your comments are welcome as an aid in determining the applicant’s ability to benefit from and contribute to the Medaille College Division of Management & Leadership Programs.

1. How long have you know the applicant? Is the capacity professional or personal?

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2. What qualities do you particularly admire about the applicant? Please relate to a work situation.

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3. What skills do you think the applicant could improve upon, if any?

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4. Medaille College requires three years of significant full-time work experience for the applicants of the master’s degree programs. Please provide information regarding the applicant’s work that substantiates his/her experience.

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On a scale of 1 to 5 (with 5 being the strongest), how do you rate the Applicant’s ability to:

	1	2	3	4	5
Interact with a Group					
Cooperate in meeting group goals					
Clearly express him/herself verbally					
Clearly express him/herself in writing					
Solve Problems					
Carry out assigned tasks					
Utilize learned material or skills					
Work Independently					
Work under stress					
Assume personal responsibility					

**Signature of Person Providing Reference**

**Date**