

LETTER OF EVALUATION MASTER OF SOCIAL WORK

<u>Instructions for Submittal</u>

Comments: (Limit 1000 Characters)

Applicants must fill out the first two sections of this form, save, and send to each evaluator. Each evaluator must fill out remaining sections and <u>send directly</u> to the Office of Graduate Studies, <u>gradstu@uwgb.edu</u> or Office of Graduate Studies, <u>2420 Nicolet Drive</u>, Green Bay, WI 54311-7001.

First Name	Middle Name	Last Name
access to their educational rece evaluation, in which case the le	Rights and Privacy Act of 1974, student ords, including letters of evaluation. Ho	s enrolled at the University of Wisconsin-Green Bay have vever, students may waive their right to see letters of oplicant has not signed a waiver, he or she may request to s decision is indicated below:
Applicant's Electronic Signatu	re I	ate (mm/dd/yyyy)
The applicant referenced above Bay. The information you shar completing this form. No addit	e with us will be valuable in making an tional letter is necessary. Questions can	ocial Work program at the University of Wisconsin-Gree dmission decision. We appreciate your effort in be forwarded to the Office of Graduate Studies at
Bay. The information you shar completing this form. No addit gradstu@uwgb.edu. Please fill EVALUATOR INFORMATI	e with us will be valuable in making an tional letter is necessary. Questions can out this survey in its entirety.	
The applicant referenced above Bay. The information you shar completing this form. No addit gradstu@uwgb.edu. Please fill EVALUATOR INFORMATI	e with us will be valuable in making an tional letter is necessary. Questions can out this survey in its entirety. ION:	dmission decision. We appreciate your effort in be forwarded to the Office of Graduate Studies at
The applicant referenced above Bay. The information you shar completing this form. No addit gradstu@uwgb.edu. Please fill EVALUATOR INFORMATI Full Name Employer	e with us will be valuable in making an tional letter is necessary. Questions can out this survey in its entirety. ION:	dmission decision. We appreciate your effort in
The applicant referenced above Bay. The information you shar completing this form. No addit gradstu@uwgb.edu. Please fill	e with us will be valuable in making an tional letter is necessary. Questions can out this survey in its entirety. ION:	dmission decision. We appreciate your effort in be forwarded to the Office of Graduate Studies at itle/Position

What do you consider the applicant's major strengths in terms of his/her ability to do graduate level work? (Limit 2500 Characters)
What do you consider the applicant's major strengths as a social worker? (Limit 2500 Characters)
How would you assess the applicant's ability to work with wide range of people, especially those who differ in terms of race, culture, sexual orientation or age? (Limit 2500 Characters)

What do you see as the applicant's major challenges in attempting to complete academic requirements (Limit 2250 Characters)	s of a graduate program?
What do you see as the applicant's major challenges in moving into leadership and independent positi worker? (Limit 2250 Characters)	ons as an MSW social
Please indicate any other information relevant to the applicant's potential as a graduate student. (Limit	3000 Characters)

Comparing the applicant to other individuals in the same field with approximately the same amount of experience and training, please indicate your evaluation of this applicant's ability and professional competence by marking the appropriate ranking.

	Top 10 %	Top 25 %	Top 50%	Lower 50%	Lower 25%	Unable to Rate
Intellectual Capacity						
Oral Communication Ability						
Written Communication Ability						
Originality/Creativity						
Understanding of Self						
Sensitivity to Needs and Feelings of Others						
Ability to Respect Differences						
Ability to Work with Differences in People						
Potential as Leader						
Maturity and Professionalism						
Ability to Work Collaboratively						
Integrity						
Potential as a Social Worker						

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Recommend Highly
Recommend
Recommend with Reservations
Not Recommended

Eva	luator's E	llectronic S	Signature	I	Date ((mm/
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Date (mm/dd/yyy	/y)	