UCDNN | SCHOOL OF SOCIAL WORK

BSW Recommendation Form

Reference Name:

Title/Profession:

Applicant Name:

How long have you known the applicant?

In what capacity have you known the applicant:

Thank you for serving as a reference. If you require more space to answer any of the questions, please attach an additional document.

E-mail your completed recommendation form to swadmission@uconn.edu by February 1.

If you wish to know whether the applicant has or has not waived their right to view the recommendation, please contact the Office of Student and Academic Services at the UConn School of Social Work at (959) 200-3605.

Describe the applicant's ability to get along with and relate to others, including those who are different from them.

Please describe the applicant's ability to communicate clearly, both orally and in writing.

What are the applicant's strengths?

What are the applicant's challenges?

Describe the applicant's level of maturity and responsibility.

Do you see the social work major as a fit for this applicant? Why or why not?
(The primary mission of the social work profession is to enhance human well-being and help
meet the basic human needs of all people, with particular attention to the needs and
empowerment of people who are vulnerable, oppressed, and living in poverty. https://
www.socialworkers.org)

Is there anything else you would like to add that we haven't asked?

Please indicate your overall recommendation for this applicant:

- □ I recommend the applicant without reservation
- □ I recommend the applicant as a good prospect
- $\hfill\square$ I recommend the applicant with some reservations
- $\hfill\square$ The applicant is not a good fit for the BSW program

Signature