



School of Nursing

## Reference for Admission to the Bachelor of Science in Nursing Program

**Printed name of applicant:** \_\_\_\_\_ **Reference deadline:** \_\_\_\_\_

**NOTE TO APPLICANT: Please Read Carefully**

By law, the applicant has the right to obtain and review this document. To waive or maintain this right, place your initials in the appropriate box. Choosing to maintain your right does not affect your application status in any way.

I, \_\_\_\_\_ *print name* \_\_\_\_\_,

waive my right       maintain my right to read this reference form.

*Date:* \_\_\_\_\_ *Signature:* \_\_\_\_\_

**To be completed by the person providing the reference:**

Name and title:	How long have you known this student?
University or college:	In which course(s) did you work with this student?

Please rate the applicant's characteristics and skills:

Characteristic or Skill	Not Observed	Below average	Average	Above Average	Exemplary
Academic ability					
Work ethic and initiative					
Maturity					
Written communication					
Verbal communication					
Ability to work in groups					
Self-motivation					
Acceptance of constructive criticism					

Do you have any reason to doubt this applicant's academic integrity?       Yes       No

Comments:

Signature:	Date:	Email:
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Submit form to the USC  
Aiken School of Nursing  
APG Committee via **one** of  
these methods:

edwar342@mailbox.sc.edu

pinnell@mailbox.sc.edu

**USC Union**  
Attn: Nursing Department  
PO Drawer 729  
Union, SC 29379