

Reference for Admission to Doctor of Counselling and Psychotherapy

- 1. To the applicant:** Complete this section before forwarding the form to the referee. The referee will send the completed form directly to the university.

Name of Applicant:

Surname

Given Name(s)

Previous Names (If Applicable)

- 2. To the referee:** Yorkville University appreciates your appraisal of this applicant. This evaluation will be used only for admission purposes and is confidential. **Referees should be professionally or academically related to the applicant. One referee should be an individual who supervised one of the applicant's practica during the applicant's master's program.**

I have known the applicant as	an undergraduate student	for year(s) month(s).
	a graduate student	
	an employee	
	in another capacity (please specify):	

- 3. Ratings:** Please rank the applicant as follows:

0 = Unable to Judge, 1 = Below Average, 2 = Average, 3 = Above Average (Top 20%), 4 = Exceptional (Top 5%)

Intellectual Capacity	Work Ethic	With approximately how many others are you comparing this applicant?
Preparedness	Oral Communication	
Originality	Writing Skills	
Initiative	Overall	

- 4. Suitability:** Does this applicant demonstrate the ability to engage in doctoral level studies in the program to which he/she seeks admission?

Yes Recommended: **Please attach a typed letter of reference which indicates the applicant's suitability for the program.**

Not Recommended: **Please attach a statement that explains areas of concerns.**

5. Personal information of referee:

Referee's Name in Print:	Phone:
Title:	Email:
Work Address:	Fax:
Signature:	Date:

To the referee: Please email the completed reference directly to the university at documents@yorkvilleu.ca.