



## EMPLOYER REFERENCE FORM

Letter of Reference for: \_\_\_\_\_

Thank you for agreeing to reference this student for Rice Memorial Hospital, Willmar, MN. Please comment on this student in the areas listed. Your reference provides valuable assistance to us in considering this person for the Summer Intern Program.

Please return it to the applicant in a sealed envelope. Reference forms need to be submitted as part of the application packet. Completed packets must be in by December 4, 2009.

**Initiative:**

Below Average       Average       Above Average       Superior  
Comments:

**Quality of Work:**

Below Average       Average       Above Average       Superior  
Comments:

**Dependability:**

Below Average       Average       Above Average       Superior  
Comments:

**Communication Skills:**

Below Average       Average       Above Average       Superior  
Comments:

**Ability to Work Independently:**

Below Average       Average       Above Average       Superior  
Comments:

(OVER)

**Ability to Accept Authority and Work With Others:**

\_\_\_ Below Average      \_\_\_ Average      \_\_\_ Above Average      \_\_\_ Superior

Comments:

Please summarize three (3) of the student's positive characteristics:

Discuss one area of growth/need for improvement for this student:

(Please add additional sheets if necessary)

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_