



UNIVERSITY
of HAWAII®
HILO

University of Hawaii Hilo School of Nursing

DOCTOR OF NURSING PRACTICE

Letter of Recommendation

PLEASE PRINT OR TYPE

To the Applicant: Please complete this section and deliver to 3 professionals such as physicians, instructors, employers or clinical supervisors. It is recommended that you select persons with advanced degrees such as MD, masters or doctoral level to complete this form who can address your potential or ability to function in the advanced practice nursing role.

Name of Applicant: Last Name _____ First Name _____ MI _____

In accordance with the Family Education Rights and Privacy Act, if accepted and enrolled, you have the right of access to any and all letters of recommendation. Waiver of this right is voluntary.

Applicant: Please sign below to make this a confidential recommendation by waiving your right of access.

Signature: _____ Date: _____

To the Recommender: The person whose name appears above is seeking admission to the Doctor of Nursing Practice program in the School of Nursing at the University of Hawai'i at Hilo and is requesting your evaluation as part of the application and selection process. Please provide your candid appraisal of the applicant's strengths and limitations with regard to the applicant's potential as a graduate student and an advanced nurse.

Name of Recommender: _____

Position/Title: _____

Agency/School/Organization: _____

Address: _____

Length of time and capacity
in which you have known the
applicant: _____

- I ☐ **strongly recommend** that the applicant be admitted to the UH Hilo DNP Program
☐ **recommend** that the applicant be admitted to the UH Hilo DNP Program
☐ **recommend with reservations** that the applicant be admitted to the UH Hilo DNP Program
☐ **do not recommend** that the applicant be admitted to the UH Hilo DNP Program

Signature: _____ Date: _____

Re: _____

	Outstanding	Above Average	Average	Below Average	Poor	Unable to Rate
Scholastic Aptitude						
Ability to think clearly and logically and able to make decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to comprehend theoretical concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to assimilate theoretical concepts and apply to practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation						
Is committed to professional growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a positive work ethic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to assume responsibility: carry out assignments and tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness and efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Qualities						
Ability to work well as a team member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays self-confidence and maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of personal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to be flexible and capable of change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to exercise sound judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to perform under stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicates well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates honesty, sincerity and empathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courteous and outgoing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicates well, verbal and written	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***In an ATTACHED LETTER, please elaborate on any details you think would help the admissions committee make a decision regarding this applicant's suitability for graduate work and a career as an advanced nurse.**

Thank you very much for your time and thoughtful consideration in responding to the applicant's request for your recommendation.

Mail this form in a sealed envelope with the reference's signature across the seal by Jan 15 to:

UH Hilo Admissions Graduate Applications
200 W. Kawili Street
Hilo, HI 96720