

## Faculty Evaluation Form

**TO BE COMPLETED BY THE STUDENT:**

Name: \_\_\_\_\_ SID#: \_\_\_\_\_  
 AAMC ID#: \_\_\_\_\_ (if available)

school (circle one): Medical / Dental / Pharmacy / Optometry / Veterinary / or other (specify)  
 \_\_\_\_\_

You are responsible for giving this form to the faculty member of your choice and ensuring that it is returned to the Biology Department Office (Rm. 214, Science Center) in time for consideration by the Health Professions Committee. Request evaluations only from faculty members who know you well and are comfortable writing you a good letter of recommendation. **You must indicate whether or not you waive your right of access to this confidential information by signing one of the blocks below.**

I hereby voluntarily waive and relinquish my rights of access to my letters of evaluation.	I retain my right of access to my letters of evaluation.
<b>Signature Date</b>	<b>Signature Date</b>

Evaluator (print name): \_\_\_\_\_ Department: \_\_\_\_\_  
 Title/Occupation (non-faculty evaluators): \_\_\_\_\_  
 .....

**TO BE COMPLETED BY THE EVALUATOR:**

This student has been requested to secure evaluations from instructors who know him/her and his/her work.  
 Your rating will be recorded with those of other evaluators and included in a Health Professions Committee Report;  
 your comments will be quoted in their entirety. Please fill in the information in the provided space **or** provide an attached letter.  
 All evaluators should fill in the table on the reverse side of this sheet.  
 How well do you know the student?

Have you any reason to question the student's integrity? \_\_\_ No \_\_\_ Yes. If yes, please explain.

Signature of Evaluator: \_\_\_\_\_ Date \_\_\_\_\_

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	Outstanding	Very Good	Good	Average	Below Average	Poor	No Basis to Evaluate
Emotional Stability							
Written Communication							
Oral Communication							
Work Habits							
Personality							
Intellectual independence and curiosity							
Ability to work with others							
Sense of Responsibility; Reliability							
Ability to interpret results							
Motivation							

Evaluator's Overall Recommendation	Enthusiastic	Confident	Recommend	Reservation	Not Recommend	No comment

**Additional Comments:** A narrative that describes the applicant's intellectual ability, personal characteristics, and interpersonal skills and gives tangible examples is most useful to admissions committees at professional schools. Please feel free to attach a separate letter with your comments. The letter should be on letterhead and signed.