



NURSING EVALUATION FORM

TRANSFER APPLICANTS

SAINT FRANCIS
UNIVERSITY

The completion of this form is necessary for admission into the nursing program as a transfer student. Please fill in your name, address, and dates of attendance on this form and submit it to the Department Chair of the Nursing Program you were enrolled in. SFU reserves the right to contact persons providing recommendations and to acknowledge receipt of recommendations.

Student's Name _____

Home Address _____

Email _____ Phone _____

Institution _____ Dates of Attendance _____

The Family Educational Rights and Privacy Act of 1974, as amended, guarantees confidentiality of the student's educational records. In an effort to expedite my transfer, I, _____ authorize the Dean of Students Office to release all information as it pertains to my conduct and code of behavior.

Signature of Applicant _____ Date _____

TO THE NURSING PROGRAM DIRECTOR:

This student named above has applied for admission as a transfer student to Saint Francis University's nursing program. Please complete this form and return this form to the Director of Admissions, Saint Francis University, PO Box 600, Loretto, PA 15940. Your assistance is greatly appreciated.

1. How long have you known the applicant? _____
2. How well do you know the applicant? _____ Very Well _____ Moderately Well _____ Slightly
3. In what capacity do you know the applicant? _____
4. Is the student eligible to remain in your nursing program? _____ Yes _____ No (please explain on back)
5. Rating Scale: Please rate the candidate on each of the following by circling the appropriate numbers:

	Outstanding	Average	Below	N/A
Clinical Skills	3	2	1	N/A
Academic Ability	3	2	1	N/A
Motivation	3	2	1	N/A
Interpersonal Skills	3	2	1	N/A
Perseverance	3	2	1	N/A
Reliability	3	2	1	N/A

What is the applicant's area of strength?

What is the applicant's area of weakness?

Overall Recommendation: _____ Strongly recommended _____ Recommend
_____ Recommend with reservations _____ Do not recommend

Signed _____ Name _____
Title _____ Institution _____

Admissions@francis.edu