

REFERENCE FORM

NOTE: STUDENT SHOULD SUBMIT ALL LETTERS OF RECOMMENDATION WITH OTHER APPLICATION MATERIALS. THE PERSON COMPLETING THE REFERENCE FORM SHOULD PUT IT IN AN ENVELOPE, SEAL THE ENVELOPE, AND SIGN ACROSS THE SEAL.

Office of Graduate Studies
 Department of Kinesiology and Health Promotion
 100 Seaton Building
 University of Kentucky
 Lexington, KY 40506-0219

____ Master's Program
 ____ Doctoral Program

Applicant _____

Proposed Area of Study _____

The individual named above is applying for admission to advanced graduate study in the Department of Kinesiology and Health Promotion at the University of Kentucky. Your appraisal of the applicant's qualifications to undertake and benefit from such a program will be very helpful to the admissions committee. Thank you for your assistance.

- (1). In what capacity have you known the applicant?
- Applicant's teacher
 - Employer
 - Supervisor/Principal/Superintendent
 - University Administrator
 - Other (Please specify) _____
- (2). In your estimation, how does this applicant compare with other advanced graduate students on the following characteristics:

| Characteristic | Superior (Top 10%) | Above Average (Upper 30%) | Average (Middle 40%) | Below Average (Lower 30%) | No Opportunity To Observe |
|--|-----------------------|---------------------------------|-------------------------|---------------------------------|---------------------------------|
| Scholarship | | | | | |
| Integrity | | | | | |
| Initiative | | | | | |
| Diligence | | | | | |
| Leadership | | | | | |
| Willingness to assume responsibility | | | | | |
| Ability to do research | | | | | |
| Ability to express ideas in writing | | | | | |
| Ability to express ideas verbally | | | | | |
| Ability to relate to others | | | | | |

(3). Considering academic ability and persistence, what level of success is the applicant likely to have:

- Excel in a graduate program
- Perform adequately, but not excel
- Experience considerable difficulty
- Fail to complete a graduate program

(4). Would you employ this person in a professional capacity if you had a vacancy for which the applicant were qualified?

- Yes
- No (If "No," please explain)

(5) Use this space to amplify on any of the items in this form. Please comment on the candidate's ability to complete an advanced degree. (This form is incomplete without your comments.)

Signature _____

Print: _____

Title _____

Agency _____

Date _____

Please return the completed form to:

Director of Graduate Studies
Department of KHP
100 Seaton Building
University of Kentucky
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