

**Instructions to the Applicant**

1. You are required to submit two (2) reference forms; one should be from someone that is familiar with your academic ability (college professor) and one should be from a physical therapist. The person providing the reference may not be related to you.
2. Please fill out the portion of this form above the dotted line. The rest of the form should be filled out by your reference.
3. This reference form must be mailed directly to the Graduate School. Please make sure the person providing the reference is given ample time to complete and mail the reference form so that it is received by the February 16<sup>th</sup> deadline. Incomplete applications will not be considered for admission.

The Graduate School  
University of North Florida  
1 UNF Drive  
Jacksonville, FL 32224

Applicant Full Name: \_\_\_\_\_  
N# (if known): \_\_\_\_\_ Applicant phone number: \_\_\_\_\_  
Applicant Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Person Providing the Reference: \_\_\_\_\_ Date: \_\_\_\_\_

Please check one of the following:

- I give permission for this information to remain confidential and not made available to me.
- I reserve the right to view this information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Instructions for the Reference:**

1. Please fill out the remaining portion of this form. The person named above is applying to the University of North Florida's Doctor of Physical Therapy (DPT) program. If accepted the applicant will spend eight semesters undergoing rigorous academic and practical preparation to become a physical therapist. Upon successful completion of the program students are qualified to sit for a national board exam.
2. Return this entire form, by mail, to the address above. All application materials are due by February 16<sup>th</sup>. Failure to comply with this deadline will result in removal of the applicant from consideration for admission. Since we make admission's decisions as complete applications are received, a rapid response may result in early notification for the applicant.

3. Faxed forms will not be accepted.
4. Only this form will be accepted.

**Please answer the following questions about the applicant.**

1. How long have you known the applicant?
2. How do you know the applicant?
3. **Assessment of the applicant:** Using the scale below, please evaluate the applicant. The ten generic abilities listed are essential for successful practice as a physical therapist. The items were developed by Warren May and Associates of the University of Wisconsin-Madison's Physical Therapy Program and have been adopted for our use. Please feel free to write any additional comments in the space provided.

<i>4 – Excellent</i>	<i>3 – Good</i>	<i>2 – Average</i>	<i>1 – Poor</i>	<i>0 – Unsure</i>
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- a. \_\_\_\_\_ **Commitment to learning.** The ability to self-assess, self-correct and self direct. Identifies needs and sources of learning; continually seeks new self knowledge and understanding.
- b. \_\_\_\_\_ **Interpersonal skills.** The ability to interact effectively with patients, families, colleagues, other health care professionals and the community; deals effectively with cultural or ethnic diversity issues.
- c. \_\_\_\_\_ **Communication skills.** The ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes.
- d. \_\_\_\_\_ **Effective use of time and resources.** The ability to obtain the maximum benefit from minimum investment of time and resources.

- e. \_\_\_\_\_ **Use of constructive feedback.** The ability to identify sources and seek out feedback; effectively uses and provides feedback to improve interpersonal interaction.
  
- f. \_\_\_\_\_ **Problem solving.** The ability to recognize and define problems, analyze data, develop and implement solutions and evaluate outcomes.
  
- g. \_\_\_\_\_ **Professionalism.** The ability to exhibit appropriate professional conduct and to represent the profession effectively.
  
- h. \_\_\_\_\_ **Responsibility.** The ability to fulfill commitments and be accountable for actions and outcomes.
  
- i. \_\_\_\_\_ **Critical thinking.** The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, illusions, assumptions; distinguish the relevant from the irrelevant.
  
- j. \_\_\_\_\_ **Stress Management.** The ability to identify sources of stress and to develop effective coping behaviors.

4. What is your overall impression of this applicant (feel free to comment below):

\_\_\_\_\_ Highly Recommend

\_\_\_\_\_ Recommend

\_\_\_\_\_ Recommend with Reservation

\_\_\_\_\_ Do not Recommend

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

Date: \_\_\_\_\_

Full Name and title: \_\_\_\_\_

*The University of North Florida's Physical Therapy Program appreciates your efforts and the time you have devoted to fill out this form.*