



Reference Form

NYIT College of Arts & Sciences
Master of Science in Mental Health Counseling

APPLICANT INFORMATION

Last name	First name	Middle name
Preferred Phone number	Preferred email	
Address		
City	State	Zip code

Please complete the above portion and distribute one form to each reference. You must have a total of three (3) references in your portfolio. Your references can either submit the form back to you in a sealed envelope or directly submit their form to the Mental Health Counseling department via email/fax/mail (see contact information at the end of the form).

I give permission for this information to remain confidential and not made available to me.

I reserve the right to view this information.

Applicant's signature	Date	MM/DD/YYYY
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REFERENCE INFORMATION

Last name	First name	Middle name
Title		
Preferred Phone number	Preferred email	
Address		
City	State	Zip code

Thank you for your willingness to serve as an official reference for the above named applicant for admission into the Mental Health Counseling program at New York Institute of Technology. Your comments and observations are an essential part of our admissions decisions. We ask you for your honest and direct feedback regarding the qualifications of the applicant. This form has been designed to aid you in this process. Please complete the rating scales and whenever possible provide narrative comments that address specific behaviors you have observed regarding the applicant.

1. How long have you known the applicant?	From	MM/DD/YYYY	To	MM/DD/YYYY
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2. Please indicate how you know the applicant

3. Please assess the following characteristics of the candidate on a four point scale as indicated below. Where appropriate, please provide an example of a specific activity or action performed by the candidate which you believe supports your rating.

5 = superior, top 5%	3 = above average, top 25%	1 = low level, bottom 50%
4 = high level, top 10%	2 = average level, top 50%	d/k = don't know/no basis for judgment

d/k 1 2 3 4 5

a. Demonstrates professional behavior

Comments/example

d/k 1 2 3 4 5

b. Demonstrates ethical behavior

Comments/example

d/k 1 2 3 4 5

c. Displays a commitment to social justice

Comments/example

d/k 1 2 3 4 5

d. Has demonstrated leadership potential

Comments/example

d/k 1 2 3 4 5

e. Considers situational and environmental factors that influence behavior

Comments/example

d/k 1 2 3 4 5

f. Actively engages in activities that will improve professional effectiveness

Comments/example

d/k 1 2 3 4 5

g. Shows a genuine interest in working with children, youth, and teens

Comments/example

4. Please rate the candidate on your overall sense of his/her ability and potential

d/k 1 2 3 4 5

a. As a Master's degree candidate

b. To undertake a rigorous academic course of study

5. Please provide any additional comments regarding this applicant's ability and potential to become an effective mental health counselor

Signature

Date

MM/DD/YYYY

CONTACT INFORMATION

Please submit reference form via email to:

New York Institute of Technology
College of Arts and Sciences

Attn: Erin Fabian (efabian@nyit.edu)

1855 Broadway, New York, NY 10023