

LETTER OF RECOMMENDATION

Master’s Entry Program in Nursing (MEPN) applicants must submit three letters of recommendation from a professional reference. These should be professional people with whom you have been in contact within the last five years. Please ask your recommender to address the questions below.

Name of Applicant: _____

By signing this form, I waive my right to review this document.

Signature of Applicant Date

The above named applicant has selected you as a reference in regards to her/his request of admission to the University of Hawai’i at Mānoa School of Nursing and Dental Hygiene Master’s Entry Program in Nursing (MEPN). We would appreciate your frank comments about the applicant named in this reference report. The principal goal of the program is to prepare persons with degrees in other fields for nursing careers as advanced practice nurses. It is anticipated that graduates will assume leadership positions.

Please address the following in your comments. Please mail completed form to:
Office of Student Services
UHM School of Nursing and Dental Hygiene
MEPN Program
2528 McCarthy Mall, Webster Hall 201
Honolulu, Hawai’i 96822

In addition to written comments, please rate the applicant in the items below using the numerical score of 1-4.

1=Poor 2=Below Average 3=Above Average 4= Excellent

1. Work competence/responsibility or academic performance Score _____

2. Leadership skills/potential/maturity including
communication/interpersonal skills Score _____

