

MOREHOUSE SCHOOL OF MEDICINE Master of Public Health Program

720 Westview Drive, S.W., Atlanta, GA 30310-1495

| LETTER OF REFERENCE | | | | | | |
|--|---|----------------|--|---------------|---------------------------------|--|
| Applicant's Name:(Last) | | (First) | | | (Middle) | |
| Recommender's Name: (Last) | | (First) | | | (Middle) | |
| Pursuant to the Family Educational Rights and I have have not waived the | | | | | | |
| Date Signature of Applicant | | | | | | |
| We ask you to evaluate this applicant for ac Master of Public Health Program has a particula | | | | | | |
| The Master of Public Health Program augn improve the health, quality of life and we service in public health. The program focu goals of the MSM MPH Program are: | II-being of | communities | and people thr | ough educa | ation, research and | |
| to prepare graduates for leadership in the to educate students to understand and ad particular emphasis on underserved populities to collaborate with communities in projects to improve and impact public health policies and mortality among African Americans ar | dress the h ations, s and activi es and prac | ties to impro- | of communities, ve and sustain th r to promote hea | neir health a | nd well-being, | |
| to discover, develop, and advance kn disproportionately affect underserved pop To increase the representation of African A professions. | owledge i ulations, | through bas | ic and applied | | | |
| 1. a) How long have you known the applicant?b) How well do you know the applicant?c) Has the applicant been | □ Casual □ An adv | ly | | sistant 🗆 | Very well Research assistant | |
| Other | | | | | | |
| 2. Where would you rank this student with resp | | | 11 | T | | |
| Employees working in your department Students currently in your department Students you have sent to master's programs Students you have sent to doctoral programs Orientation to Public Health | ower 25% | Mid 25% | Upper 25% | Top 10% | Unable to Judge | |
| (over) | | | | | | |

3. Please rate the applicant on the attributes listed below with respect to others at the same academic/employment level:

| | Lower 25% | Mid 25% | Upper 25% | Top 10% | Unable to Judge |
|---|-----------|---------|-----------|---------|-----------------|
| Basic intellectual ability | | | | | |
| Knowledge and competence | | | | | |
| Motivation and diligence | | | | | |
| Research ability | | | | | |
| Leadership potential/community involvemer | nt 🗆 | | | | |
| Maturity and social skills | | | | | |
| Work habits | | | | | |
| Orientation to Public Health | | | | | |
| Originality, aptitude for independent problem solving | | | | | |
| Ability to communicate orally | | | | | |
| Ability to communicate in writing | | | | | |

4. If you alone were making the admission decision on this applicant, which of the following would it be?

Actively recruit - will be a truly outstanding student and public health professional.

Definitely accept - will complete the indicated program at a superior level.

Accept - should complete the indicated program at a satisfactory level.

Accept - with reservation. (Please attach explanation)

Do not accept. (Please attach explanation)

5. We are interested in your knowledge and opinion of this individual's qualifications and capabilities to enter professional education for public health at the graduate level. Some factors viewed as important for success in this program are intellectual capacity, leadership ability, motivation, emotional maturity and service to community.

Please attach a separate letter. Thank you for your cooperation.

| Name | Date |
|------|------|
| | |

Title_

Prompt return of this reference will be appreciated both by the Program and the applicant, since the application cannot be considered by admissions until all application materials have been received by the Admissions Office.

Please return to: Office of Admissions Master of Public Health Program Morehouse School of Medicine 720 Westview Drive, S.W. Atlanta, GA 30310-1495

Deadline:

March 1