Transfer Student Reference Form

Student Name: ___________________________________________________________

College/University Attended: ________________________________________________

The student identified above has applied to the CCSU Social Work Program. Using the scale below, please evaluate the student’s professional social work attitudes and behaviors as evidenced by the following:

Scale:
5 = Always, 4 = Almost Always, 3 = Sometimes, 2 = Almost Never, 1 = Never, C/E = Cannot Evaluate

1.) Demonstrates beginning knowledge about the field of social work/social welfare.
   5  4  3  2  1  C/E

2.) Demonstrates beginning listening skills.
   5  4  3  2  1  C/E

3.) Demonstrates ability to be warm and accepting.
   5  4  3  2  1  C/E

4.) Demonstrates ability to adjust to a new situation.
   5  4  3  2  1  C/E

5.) Able to respond to unpredictable situations/circumstances.
   5  4  3  2  1  C/E

6.) Demonstrates flexibility.
   5  4  3  2  1  C/E

7.) Demonstrates sensitivity and awareness to ethnical and cultural differences.
   5  4  3  2  1  C/E

8.) Demonstrates self-awareness.
   5  4  3  2  1  C/E

9.) Exhibits respect towards fellow students, co-workers and clients.
   5  4  3  2  1  C/E

10.) Student identifies with Social Work profession
    5  4  3  2  1  C/E

11.) Demonstrates good writing skills.
    5  4  3  2  1  C/E

Comments:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Name and Title of Evaluator:

______________________________________________________________________________

Name__________________________________________________________________________

Title__________________________________________________________________________

Signature______________________________________________Date____________________