California State University, Long Beach
Department of Kinesiology
Athletic Training Education Program
Letter of Recommendation

This Part to be Completed by the Applicant:

Applicant’s Name:

_________________________________________  __________________________________
Last   First   Middle

Before giving this form to the individual providing this reference please check one box and sign
in the space provided in accordance with the Family Education Rights and Privacy Act of 1974.

☐ I agree to waive access to this statement form
☐ I do not agree to waive access to this statement form

Signature of Applicant: ___________________________  Date: ______________________

This Part to be Completed by the Recommender

Letters of recommendation play an important role in our selection process, and we greatly
appreciate your thoughtful and frank appraisal of the applicant. The ATEP is particularly
interested in an evaluation of the applicant’s potential for academic and professional
achievement in the field of athletic training. If you do not know the applicant well enough to
complete the following form, please return it to the applicant.

After completing this form, please place it in a sealed envelope, sign across the seal, and submit
to:

Keith Freesemann, EdD, ATC
Athletic Training Education Program
Department of Kinesiology
California State University, Long Beach
1250 Bellflower Blvd.
Long Beach, CA 90840-4901

Please Continue to the next page
I. Please rate the applicants on the qualities listed below using the following rating scale (please mark appropriate box):
1=lower 50% (below average), 2=in the 50% (average), 3=upper 25% (above average), 4=upper 15% (outstanding individual), 5=upper 5% (exceptional individual), N/A=no basis for judgment

<table>
<thead>
<tr>
<th>Quality</th>
<th>1 Below Average</th>
<th>2 Average</th>
<th>3 Above Average</th>
<th>4 Outstanding</th>
<th>5 Exceptional</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Ability to communicate effectively (oral, include poise)</td>
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<td>Ability to communicate effectively (written, include clarity, concise)</td>
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<td>Ability to work with others (interpersonal skills, cooperation)</td>
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<td>Evidence of psychological maturity and stability</td>
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<td>Ability to accept criticism and grow with life experience</td>
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<td>Interest in and knowledge of athletic training</td>
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<td>Potential for success in the field of athletic training</td>
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<td>Potential as a leader</td>
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<td>Reliability to complete assignments accurately and on time</td>
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<td>Cultural and community interest, involvement, and development</td>
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<td>Breadth of general knowledge, intellectual ability, logical thinking</td>
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<td>Interest in independent inquiry, ingenuity, originality, imagination</td>
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<td>Personal qualities (sincerity, enthusiasm, patience)</td>
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<td>Displays initiative (seeks knowledge, self directed)</td>
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<td>Displays flexibility</td>
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<td>Displays problem solving</td>
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II. Using the same rating scale as before, please indicate the strength of your overall endorsement and your expectations of performance by the applicant for our athletic training education program. Compare to other students.

- lower 50% (below average)
- in the 50% (average)
- upper 20% (outstanding individual)
- upper 10% (exceptional individual)
- upper 30% (above average)

III. Please indicate your attitude toward having this applicant in a responsible position under your direction.

- Definitely would want her/him
- Would prefer not to have her/him
- Definitely would not want her/him
- Would be satisfied to have her/him
- Unable to judge

*Please Continue to the next page*
IV. Please comment on the applicant’s suitability for the athletic training profession and make additional, specific comments that expand upon the ratings you gave on the previous question. Please attach additional pages as needed.

V. To your knowledge, has there ever been any disciplinary action involving this applicant which might indicate unsuitability for athletic training? (If yes, please provide full explanation in general comments above or in a letter)

☐ Yes  ☐ No

VI. How long have you known the applicant?

____________________________________________________________________________

VII. In what capacity?

____________________________________________________________________________

VIII. How well do you know the applicant?  A.☐ Very Well  B.☐ Fairly Well  C.☐ Slightly

IX. Please check one of the following:

☐ I strongly recommend this applicant for the Athletic Training Education Program.
☐ I recommend this applicant for the Athletic Training Education Program.
☐ I recommend with reservations this applicant for the Athletic Training Education Program.
☐ I do not recommend this applicant for the Athletic Training Education Program.

Recommender’s Signature: __________________________ Date: ______________

Please print name: ______________________________________________________________

First       Last

Position/Title: __________________________ Organization: __________________________

Phone: __________________________ E-mail: __________________________

Address: ________________________________________________________________