

School of Social Work
September 2012 Bachelor of Social Work

Reference in support of an application to the BSW Program	
To be completed by Applicant:	
Name: _____	
UNBC Student Number (if applicable): _____	
Remainder of form to be completed by Referee:	
Name: _____ Occupation: _____	
What is your relationship to the applicant? _____	
How long have you known the applicant? _____	
Home Phone: _____ Work Phone: _____ Email: _____	
<p>Using the scale provided, please rank the applicant for each category as follows:</p> <p>Academic Preparation Ranking: _____</p> <p>Interpersonal Skills Ranking: _____</p> <p>Attitude Ranking: _____</p> <p>Critical Thinking Ranking: _____</p>	<p>0 = not at level needed for BSW Study 1 = poor 2 = below average 3 = average 4 = good 5 = very good</p>
Please provide comments:	
1. What do you see as the strengths the applicant would bring to the social work profession?	

2. What do you see as areas of weakness this applicant may benefit from addressing in order to perform competently as a student and professional social worker?	

Signature of Referee: _____ Date: _____

* **Deadline: Wednesday, February 1, 2012, at 4:30 p.m.**
NOT for return to Applicant. Please submit form DIRECTLY to:
 Social Work Admissions, Office of the Registrar
 3333 University Way, Prince George, BC V2N 4Z9
 Fax: (250) 960-6330