

**THE NORTH CAROLINA BAPTIST HOSPITALS, INCORPORATED
NEW GRADUATE NURSE/EXTERN REFERENCE**

Student Name _____ SS# _____

School of Nursing _____ Grad. Date _____

Position Applied for _____

I authorize The North Carolina Baptist Hospitals, Incorporated to investigate my school record and I release all persons providing such information from all liability whatsoever for issuing the requested information.

Signature _____ Date _____

To the instructor: The above applicant has applied for employment and has given your name as a faculty reference. Please check the column which most clearly characterizes your appraisal of this applicant.

	Superior	Good	Average	Fair	Poor
Academic Performance/Intellectual Ability					
Critical Thinking Skills					
Clinical/Technical Competence					
Organizational Skills					
Dependability/Reliability					
Professional Attitude					
Appearance/Grooming					
Attendance/Punctuality					
Leadership Qualities					

ADDITIONAL COMMENTS: _____

In comparison with the others in the class, how would you rank this student?
Upper 10% ___ Upper 25% ___ Middle ___ Lower 25% ___ Lower 10% ___

Instructor Name _____ Title _____

Signature _____ Course(s) Taught _____