



# Felbry College - School of Nursing

6055 Cleveland Avenue, Columbus OH Tel. (614) 781-1085 Fax: (614) 917-1010 www.felbrycollege.edu

## CHARACTER REFERENCE FORM

Thank you for your interest in Felbry College School of Nursing. As a part of the admissions process, Felbry College requires that all applicants provide the names of two individuals to serve as character references for their application. Character references may be anyone except family members (ex: friends, coworkers, supervisors, employers, etc). Please contact the Admissions Office with any additional questions.

***By signing, I attest that I allow representatives of Felbry College to contact the persons listed above as references to evaluate information including, but not limited to, my general character, my suitability for the program, my communication skills, problem solving, honesty, and any other quality deemed required by the representative.***

**Applicant Printed Name:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Representative Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Program of interest**      **PN**                      **LPN Bridge**                      **AAS**

### REFERENCE INFORMATION

Name of reference: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_

Email address: \_\_\_\_\_  
\_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_  
\_\_\_\_\_

How long have you known the applicant?  
\_\_\_\_\_

How do you know the applicant (*e.g. employee, religious group member, instructor etc.*)?  
\_\_\_\_\_

**Please check the most appropriate box regarding applicant's abilities:**

	Excellent	Very good	Good	Poor	Don't know
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention to details	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work in a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem solving skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe why you think the applicant would be suitable for a nursing program:

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Please provide any additional comments about the applicant's character:

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**Reference Signature:** \_\_\_\_\_