Idaho State University, College of Technology
Associate Degree Registered Nurse Program

Employer/Clinical Instructor Reference form for ADRN admission candidates

*Must first be signed and dated by the candidate

Completed by your PN clinical instructor if application date is less than
12 months from PN graduation
Completed by your current supervisor if application date is at or
greater than 12 months from PN graduation

I __________________, being aware of my rights under Public law 93-380, hereby waive my right of access to the following recommendation. This waiver, which I understand I am not obligated to sign, can only be revoked in writing. The confidential recommendation shall not be made available to me without the writer’s written permission.

Signature______________________________ Date_________________ Student ID ______________

School/employer location _________________ Dates of education/employment____________________

Please comment on the following

1=low/not demonstrated 2=minimally demonstrated/below expectation; 3= neutral/at expectation; 4=good demonstration; 5=excellent demonstration

1. Ability to work collaboratively with peers and the healthcare team (if possible, please give examples)
   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible
   Circle one:   1    2    3    4    5

2. Ability to work collaboratively with administration/authority (if possible, please give examples)
   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible
   Circle one:   1    2    3    4    5

3. Ability to perform practical nursing according to established state and national standards (if possible, please give examples):
   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible
   Circle one:   1    2    3    4    5

4. Ability to manage time and resources appropriately (if possible, please give examples):
   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible
   Circle one:   1    2    3    4    5

5. Professional attitude and behavior (if possible, please give examples)
   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible
   Circle one:   1    2    3    4    5
6. Work ethic (includes attendance, punctuality, grooming, enthusiasm for quality nursing practice, etc.) (if possible, please give examples)

   On the scale of 1-5, 1 is low or not demonstrated & 5 is highest possible

Circle one:  1  2  3  4  5

I [enthusiastically support/support/have no opinion/do not support/do not recommend] admission of this candidate into the ISU ADRN program (check one).

☐ Enthusiastically support
☐ Support
☐ No opinion
☐ Do not support
☐ Do no recommend

Please explain the above choice.

What additional comments do you have regarding this candidate?

Signature_________________________________________ Date____________

Printed name________________________________________

Address______________________________________________

Phone_______________________________________________

Please mail or return this completed form to us at.

ADRN Admissions
ISU, College of Technology
Student Services
Mail Stop 8380
Pocatello, ID 83209-8380
Fax: 208-282-5195

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