

Middle Georgia State University
OTA Program
Professional Reference

To Whom it May Concern,

Thank you for taking the time to complete this reference for an OTA Program applicant. We appreciate your honest assessment of the applicant's professionalism as we select the next cohort for admission to the OTA Program. Because occupational therapy is a healthcare profession, we expect our students to exhibit the highest standards of professionalism, integrity, and skill. In order for the student to be considered, you must return this reference form to jamie.loyd1@mga.edu from your **work** email address ONLY. Please contact us at 478-934-7480 if you have any questions. Thanks again!

References may be submitted until May 15th.

MGA OTA Program Applicant Professional Reference Form

Applicant's Name: _____

How long have you known this individual? _____

What capacity did this individual hold at your organization? _____

Please rate the individual on the following capacities:

	Outstanding (Top 1%)	Excellent (Next 5%)	Good (Next 10%)	Average (Next 25%)	Poor (Below 50%)
Motivation and Initiative					
Attendance, punctuality, and work					
Overall quality of work					
Communication skills: - Able to articulate thoughts clearly - Able to convey written thoughts clearly					
Problem solving and critical thinking - Able to solve problems independently - Seeks assistance only when needed					
Developmental Potential -demonstrates potential for professional growth					
Accepts feedback -does not become defensive -uses feedback to make changes					
Professionalism - Demonstrates level of interpersonal skill and emotional stability needed for a healthcare profession					
Overall impression -I would recommend this student for the OTA Program					

Signature: _____ Date _____

Printed Name: _____

Place of Employment: _____