LEND TRAINEE RECOMMENDATION FORM
Behavioral Medicine & Clinical Psychology

Please return this form to: Vicky Sanders, Behavioral Medicine & Clinical Psychology Cincinnati Children's Hospital Medical Center, at vicky.sanders@cchmc.org Questions regarding this form may be directed to Vicky Sanders at 513-803-3217 or Vicky.sanders@cchmc.org

TO BE COMPLETED BY APPLICANT:

Applicant's Name	
Name of Reference	
Title of Reference	

Under the Federal Educational Rights and Privacy Act of 1974 as amended (P. L. 93-380) students are entitled to review their records, including letters of recommendation. It is the student's option to waive their rights to access their recommendations or to decline to do so. The Medical Center does not require that you make such a waiver as a condition of acceptance.

I hereby authorize to complete this recommendation form.
Check one:

☐I waive my right of access to this recommendation form.

☐I do not waive my right of access to this recommendation form.

Applicant's Signature: Date:

[Typing your name indicates your verification and acceptance of the above information.]

TO BE COMPLETED BY THE PERSON MAKING THE RECOMMENDATION:

The student above is applying for the MCH training program: Leadership Education in Neurodevelopmental and Related Disabilities (LEND Program) at Cincinnati Children's Hospital Medical Center and has selected you to provide a reference. The purpose of the MCH LEND Training Program is to improve the health of children who have, or are at risk for, developing neurodevelopmental or related disabilities, by preparing trainees from a wide variety of professional disciplines to assume leadership roles and to ensure high levels of clinical competence. Trainees will participate in an Interdisciplinary Core Curriculum for a minimum of 20 hours per week for the academic year. The curriculum will include didactic content and center-based/community-based experiences to develop trainee leadership competencies in clinical competence, family-centered care, cultural competence, interdisciplinary collaboration, public policy/systems of care, administration and research.

Please respond to the following concerning the applicant:

How long have you known the applicant?☐< One Year, ☐>One Year < Five Years, ☐> Five Years

How well do you know the applicant? ☐Very Well ☐Fairly Well ☐Not Well ☐Unknown

In what capacity have you known this applicant? ☐Student ☐Employee ☐Colleague,☐ Friend, ☐

Please describe qualifications, traits or accomplishments you feel are significant in demonstrating the applicant's ability to complete the LEND traineeship and to assume a leadership role in the area of developmental disabilities.	

What do you consider to be the applicant's areas of growth and training needs?	

On the attached sheet, please rate the applicant in each of the listed categories as compared to their peers. It is very helpful to the Selection Committee if you take the time to cite specific examples that support your rating. Please list these examples in the comments section. This form takes the place of a recommendation letter. It is not necessary to write a separate letter for the applicant.

Please indicate the confidence with which you would or would not recommend the applicant for acceptance to the CCHMC LEND program:

☐Recommend
☐Recommend with Reservations
☐Do not Recommend

Reference's Name _____

Title _____

Organization _____

E-Mail Address _____

Telephone Number _____

Reference's Signature _____ Date _____

[If completing electronically, please just type name on signature line.]

Applicant's Name

	Outstanding Top 5%	Very Good Top 0%	Good Top 25%	Average Top 50%	Below Average Below 50%	Unknown
Critical Thinking & Analysis Skills	☐	☐	☐	☐	☐	☐
Comments:						
Organizational Skills	☐	☐	☐	☐	☐	☐
Comments:						
Interpersonal Skills	☐	☐	☐	☐	☐	☐
Comments:						
Commitment to Learning	☐	☐	☐	☐	☐	☐
Comments:						
Ethics	☐	☐	☐	☐	☐	☐
Comments:						
Communication Skills	☐	☐	☐	☐	☐	☐
Comments:						
Judgment & Common Sense	☐	☐	☐	☐	☐	☐
Comments:						
Emotional Stability & Security	☐	☐	☐	☐	☐	☐
Comments:						
Leadership Potential	☐	☐	☐	☐	☐	☐
Comments:						
Motivation towards a successful & productive career	☐	☐	☐	☐	☐	☐
Comments:						
Professionalism	☐	☐	☐	☐	☐	☐
Comments:						