



# BIRTHWISE MIDWIFERY SCHOOL

## Reference Form for Applicants to the MIDWIFERY ASSISTANT PROGRAM

Dear \_\_\_\_\_, as a part of my application for admission to Birthwise Midwifery School, I have been asked to provide letters of reference from individuals who have personal and/or professional knowledge of and can attest to my character and qualities. **Please complete this form, sign it, and send a letter of reference via mail or fax it directly to:**

Student Affairs, Birthwise Midwifery School, 24 South High St., Bridgton, ME 04009; fax (207) 647-5919. Thank you very much for your time and effort on my behalf. **Please DO NOT send pictures of this form or letter of reference unless your phone or mobile device can convert the file to .pdf first.**

Please check the one that applies below:

Birth-related connection    Work/professional connection    Non-family personal reference

Applicant's Name \_\_\_\_\_

Reference's Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

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

What is your association with or knowledge of the applicant? \_\_\_\_\_

Please rate the applicant in the following areas. 1= poor 3= average 5= excellent

	1	2	3	4	5		1	2	3	4	5
Honesty/ reliability						Good judgment					
Academic Skills						Self confidence					
Writing skills						Ability to handle stress					
Takes Initiative						Leadership skills					
Organizational skills						Interpersonal skills					
Adaptability						Promise as a midwifery assistant					

On a separate sheet of paper, please include a letter of reference:

Signature \_\_\_\_\_ Date \_\_\_\_\_