FORM B: Third Year Honours Bachelor of Social Work Reference Form 2

Name of Applicant:					
How long have you					
known the applicant?					
In what capacity					
have you known the					
applicant?					
Solo	ot the coore for each ave	ation that boot	rankaanta tha	annliaant	
Seie	ct the score for each que	stion that best	represents the	applicant	
		Excellent (4)	Average (3)	Fair (2)	Poor (1)
Maturity and professiona	al conduct	Excellent (4)	Average (3)	Fall (2)	F001 (1)
Ability to work independent			+		
Demonstrates ability to d			+		
Openness to feedback			+		
Responsible and reliable					
Demonstrates sensitivity Is self-aware and reflect					
of own behavior on othe					
Values the worth, dignity				+	
	and diversity of all				
individuals				+	
Ability to navigate stressful situations				+	
Ability to establish positive working relationships				+	
Potential for leadership					
Ability to resolve conflict in a professional manner					
You may cho	oose to attach a separate	letter of referer	nce or provide	comments	helow
Tou may che	ose to attach a separate	iettei oi ieieiei	ice of provide	Comments	Delow.
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	Your Information	
- U.N.	Todi information	
Full Name		
Title/ Position		
Title/ Position		
Organization		
Organization		
Phone		
FIIONE		
Email		
Email		
Signature/ Electronic		
Signature/ Electronic Signature		
Signature/ Electronic		
Signature/ Electronic Signature		

Please email this completed form (and letter or other attachments, if applicable) to the School of Social Work at social.work@lakeheadu.ca by December 15, 2023.