



Paramedic Training Program Letter of Recommendation

Applicant's Name: _____

To the individual writing this recommendation:

The person whose name appears above is applying for admission to Emergency Medical Services Academy in the University of New Mexico's School of Medicine. Please assess the applicant's qualifications to undertake a challenging, year-long paramedic training program. We are especially interested in the applicant's preparation to succeed in a rigorous undergraduate medical program and potential for success in emergency medicine.

This recommendation will be used only for admission purposes. It will not be made a part of the student's educational record, and no reference will be made to it for educational purposes after an admissions decision is final. Therefore, this recommendation is not subject to the provisions of the Family Education Rights and Privacy Act of 1974. Applicants will not have access to this recommendation under the law.

Please attach this completed form to your letter of recommendation and send both to this address:

EMS Academy, MSC11 6260, 1 University of New Mexico, Albuquerque, NM 87131

Please remember to seal the envelope and sign along the seal. Thank you for your time.

Name of person completing form _____ Position/Title/Organization _____

Relationship to applicant (supervisor, instructor, etc.) _____ Years known _____ How well you know applicant [] Very Well [] Well [] Casually

Address _____ Phone number _____

Applicant Rating: Please rate the applicant on the following criteria.

Table with 7 columns: Criteria, Outstanding (top 5%), Very Good, Above Average, Average, Below Average, Uncertain. Rows include Intellect, Analytical skills, Creativity, Motivation, Initiative, Openness to new ideas, Empathy, Maturity, Humility, Trustworthiness, Interpersonal skills.