

**PARKLAND HEALTH & HOSPITAL SYSTEM
Administrative Residency Program**

REQUEST FOR RECOMMENDATION

This applicant is required to complete this section and provide the respondent with a stamped envelope to be addressed as follows: John Cox, Preceptor, Administrative Residency Program, Parkland Health & Hospital System, 5201 Harry Hines Blvd., Dallas, Texas 75235

Date: _____ Applicant's Name _____

Social Security No.: _____ Applying for Administrative Residency to begin: **January 2007**

Please rate the above candidate in the areas indicated below:

	Exceptional (10-9)	Above Average (8-7)	Average (6-4)	Below Average (3-2)	Poor (1-0)
Knowledge of Healthcare Field					
Intellectual Ability					
Motivation to Work					
Writing Ability					
Oral Expression					
Maturity					
Working with Others					
Creativity					
Decision Making					

Overall, I would give a: Very Strong / Strong / Average / Recommendation with reservation

Please provide any additional relevant comments about the individual applicant:

Name _____ Title _____

Name of Institution/Company _____

Address _____

Phone Number _____ Signature _____