Montana State University
Request for LETTER OF RECOMMENDATION

Name of Applicant ____________________________ e-mail: ________________

                      Last                First

This applicant is a pre-health professions student at Montana State University and is applying for admission to a health professions school. Most health professional school admissions committees require Letters of Recommendation as part of the application process. The opinion of those who know the candidate well is also essential to the Office of Health Professions Advising in preparing committee evaluations. Please write a two or three paragraph letter that describes the applicant’s intellectual and personal characteristics. The use of specific examples that illustrate these characteristics is particularly helpful. You may wish to address aspects such as maturity, interpersonal skills, integrity, empathy, reliability, self-motivation, and intellectual curiosity. In your letter it is helpful to state how long and to what extent you have known the applicant. Please consider concluding the letter with your level of endorsement of this applicant.

Copies of your Letter of Recommendation will be included with the information sent to professional schools. Please submit your signed letter on letterhead stationery. The salutation may simply read: To the Admissions Committee. Most medical and dental schools expect students to submit their applications during the summer. A composite Premedical Professions Advisory Committee (PPAC) letter must be prepared as the final step to submitting the application to schools. The specific timing will depend on the type of professional school and when this applicant is submitting his/her application, but in general it is useful to receive your letter in our office by June 1. Please submit your letter to the address below. Faxed or e-mailed letters will be accepted as long as they are on letterhead and have a signature.

You may assume the student has waived his or her right to see your letter, and that its content is confidential, but you can confirm this status by contacting our office. A copy of the letter may also be used in support of the applicant’s candidacy for awards/fellowships for which he/she may be nominated or applied. Please feel free to inform our office of restrictions you may wish to impose.

Thank you for your commitment to assisting the Health Professions Advising office and your service to this pre-health professions student.

Sheila Nielsen, PhD
Health Professions Advising Office
Leon Johnson Hall, Room 315/317
PO Box 173080
Bozeman, MT 59717-3080
Phone: 406.994.1670
Fax: 406.994.4398
Email: hpa@montana.edu