Montana State University

Request for LETTER OF RECOMMENDATION

Name of Applicant _____ email: _____

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. In addition, the opinion of those who know the candidate well is also essential to the Office of Health Professions Advising in preparing committee evaluations. Please compose a two or three paragraph letter that describes the applicant's intellectual and personal characteristics, *with which you have first hand experience*.

- 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, responsibility, self-motivation*, *analytical thinking skills* 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.
- Guidelines for Writing a Letter of Evaluation established by the Association of American Medical Colleges are available here: https://www.aamc.org/download/332578/data/lettersguidelinesbrochure.pdf.

Please submit your **signed** letter on **letterhead stationery**. The salutation may simply read: **To the Admissions Committee**. Most schools expect students to submit their applications during the summer. A composite **P**re-Health **P**rofessions **A**dvisory **C**ommittee (PPAC) letter must be prepared as the final step to submitting an application to many 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, have a signature, and come directly from you rather than through the applicant.

- *If the applicant is applying to Medical, Dental, or perhaps Physician Assistant, your letter is likely going to be submitted to our office.*
- *If the applicant is applying to Physical Therapy, Occupational Therapy, or perhaps PA, you will most likely receive an email from the application service to complete a matrix and submit your letter directly.*
- *Please contact the applicant or our office if you are unsure as to how your letter should be submitted.*

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 has 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.

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Phone: 406.994.1670
Fax: 406.994.4600 (call our office,
as not all faxed letters are received)