

**UNIVERSITY OF CALIFORNIA DAVIS HEALTH SYSTEM**  
Department of Pathology and Laboratory Medicine  
School of Clinical Laboratory Science  
**Letter of Recommendation**

**Application Deadline Date:** January 1 for September Class; September 1 for March Class.

**Please send letter to:** Jiunn Huang, Ph.D., CLS  
CLS Training Program Director  
Pathology, UC Davis Health System,  
Specialty Testing Center  
3740 Business Drive  
Sacramento, CA 95820  
e-mail: [jiunn.huang@ucdmc.ucdavis.edu](mailto:jiunn.huang@ucdmc.ucdavis.edu)

***A. To be completed by CLS trainee applicant.***

**Applicant:** Name \_\_\_\_\_  
Email \_\_\_\_\_  
**Evaluator:** Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

***B. The remainder of this form is to be completed by the evaluator.***

The contents of this letter will be held in the *strictest confidence* from unauthorized individuals.  
Please do no return to the applicant.

1. Familiarity with applicant (how known, how long, and how well known?)
  
  
  
  
  
  
  
  
  
  
2. **COMMENTS:** Please include in this section all pertinent information you have regarding the applicant, particularly (1) special strengths and weaknesses, (2) any anomalous aspects of applicant's academic record, (3) ability to do independent work, (4) extracurricular activities including employment.. This section is invaluable in deciding among applicants where all else appears equal. Please append additional sheets if necessary.

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3. If you were responsible for assigning the final grade for one or more academic programs in which the applicant participated, please provide a breakdown of the distribution of grades awarded and show the candidate's class standing for each course in the boxes below.

COURSE TITLE	Class Size	# A's awarded	# B's awarded	# C's awarded	# Other awarded	Applic Rank	Applic Grade

4. **PROFILE** (Optional - some evaluators may prefer not to use this section). Please circle one number for each item. 5 shows outstanding ability, 1 shows definite weakness. A score of 3 indicates average ability and a minimal level of performance.

	<u>High</u>				<u>Low</u>
Reliability (intellectual and personal integrity, promptness, conscientiousness)	5	4	3	2	1
Emotional Control (self-control, judgment, consistency, maturity, dependability)	5	4	3	2	1
Social values (sensitivity to needs of others)	5	4	3	2	1
Industry (drive, initiative, work habits performance)	5	4	3	2	1
Personality (manners, courtesy, tact, poise)	5	4	3	2	1
Laboratory skills	5	4	3	2	1

5. **SUMMARY OPINION:** Please circle the number in front of the category in which you would place this applicant regarding his/her *overall suitability* as a clinical laboratory scientist trainee. State what group the applicant is compared to:

7. Outstanding. A person who appears only once every few years.
6. An excellent applicant. In the upper 10% of applicants I have known.
5. Well above average. In the upper 1/4 of applicants I have known.
4. Above average.
3. Average.
2. Slightly below average. Should be able to complete work in Clinical Laboratory Science.
1. Well below average. Not recommended.

This is a:          Committee or composite          Individual evaluation (Chairman signs for committee)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_