Oklahoma Baptist University School of Nursing Student **Request for Reference**

Instructions: Please complete form in its entirety. Save completed document to your desktop, attach to your email, and submit to nursing@okbu.edu.

The faculty of the School of Nursing may provide evaluations or references for students upon request. To request a reference, please complete this form and return it to the appropriate faculty member. All completed forms will be sent **directly** to the agency or representative requested.

Name of Student: _____ Classification: _____

Name of Faculty: _____ Advisor: ____

Due Date for Reference:

Reason Reference Requested:

What position (Organization, Unit, and Area) have you applied for?

Work Experience in Nursing:

Organizations/Activities:

Academic Activities/Honors:

Are there any specific characteristics that the faculty member is to evaluate? If so, please list.

Name and Address where Reference is to be sent: