Dear Evaluator:

The Pre-Medical Sciences Program at the University of Montana appreciates your willingness to evaluate this applicant for admission to a professional health care school. The letter of recommendation you provide and information from several other evaluations will be used to help the Pre-Medical Sciences Advising Committee prepare composite evaluation for the applicant that will be forwarded on to the professional schools of the student’s choice. **The student requesting this letter has waived his/her right to examine your evaluation.** Please use your evaluation to show advocacy for the student as letters of recommendation are considered a critical part of most applications; *if you feel you cannot write a positive and supportive letter, please let the student know, so that they can find another letter writer.* While the specific timing of when your letter is needed depends on when this applicant is submitting his/her application, it is most useful for our office to receive your letter by May 15. A copy of your letter of recommendation will be included with the composite letter written by the University of Montana Pre-Medical Sciences Program and may also be used in support of the applicant’s candidacy for awards and fellowships for which he/she has been nominated or applied. Please notify our office if you wish to restrict the use of your letter in anyway.

**Please consider the following while preparing your evaluation:**

**Technical Details**
- Use a generic salutation: **To the Admissions Committee** (do NOT address your letter to the Pre-Medical Sciences Program: the student is applying to a professional school, not our program)
- Submit the letter **signed** (electronic signature okay) and on **letterhead** stationary
- Write at least two or three paragraphs

**Letter Content**
- Describe how long have you known the applicant and in what capacity
- Describe personal characteristics and skills of the applicant most important to admissions committees
  - Integrity and Ethics
  - Reliability and Dependability
  - Service Orientation
  - Critical Thinking Skills
- Use specific examples when possible
- State your level of endorsement of the applicant: without reservation, enthusiastically, etc.

Thank you for your commitment to assisting the Pre-Medical Sciences Program and your service to this student.
Please return your letter to the address below:

Dr. Mark Pershouse  
Pre-Medical Sciences Advising Committee  
University of Montana  
Skaggs Building 282  
Missoula, MT 59812-1512  
Phone: (406) 243-4769  
Fax: (406) 243-4209  
E-mail: premedical.sciences@umontana.edu  
Web: http://www.umt.edu/premed

Evaluator’s Signature  
Date

Evaluator’s Name  
Position or Title

Institution, Affiliation, or Address

About Us: The Pre-Medical Sciences Program at the University of Montana is an advising program that helps baccalaureate and post-baccalaureate students become well-informed, well prepared applicants to health professions schools and programs in allopathic medicine, chiropractic medicine, dentistry, naturopathy, optometry, osteopathic medicine, physician assistant, podiatry, and veterinary medicine.