

## Veterinary Medical Technology

Lincoln Memorial University  
Veterinary Medical Technology Program  
Associate of Science Degree  
Confidential Evaluator Form

**SECTION 1** (to be completed by applicant): Complete this section before giving the form to your selected evaluator. Provide a business size envelope to the evaluator.

Name (print): \_\_\_\_\_  
Last First Middle

Mailing address: \_\_\_\_\_  
Street City State Zip

Name of Evaluator: \_\_\_\_\_ Academic or Veterinary Professional (circle one)

How long and in what capacity has this evaluator know you?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Family Education Rights of 1974 and its amendment's guarantee students access to their educational records. Students can choose to waive their rights of access concerning recommendations. Please indicate your wish by checking the appropriate box below and signing.

- I waive my right to inspect this recommendation now and in the future.  
 I do not waive my right to inspect this recommendation.

\_\_\_\_\_  
Signature

Date

**Veterinary Medical Technology**

**SECTION 2** (to be completed by evaluator): This individual has applied for admission to the Veterinary Medical Technology AS Degree Program at Lincoln Memorial University.

The LMU VMT Admissions Committee values your honest assessment of the applicant's suitability for paraprofessional preparation at the undergraduate level. If the applicant has not waived the right to review this rating form, you should consider it non-confidential, and you may choose to return the form uncompleted. Once you've completed the form, place it in the envelope and sign the seal. Please return to:

Lincoln Memorial University  
 Veterinary Medical Technology Program  
 6965 Cumberland Gap Parkway  
 Harrogate, TN 37752  
 Attn: Heather Bhakta

Please evaluate the applicant in the following areas:

**INTELLECTUAL ABILITY**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**INTEGRITY**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**EMOTIONAL MATURITY**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**DISPOSITION/ATTITUDE**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**COOPERATION**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**TEAM WORK**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**PROBLEM SOLVING**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**MULTI-TASKING**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**QUALITY OF WORK**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**MOTIVATION TO PURSUE A CAREER IN VETERINARY TECHNOLOGY**

\_\_\_\_\_ Above Average      \_\_\_\_\_ Average      \_\_\_\_\_ Below Average      \_\_\_\_\_ N/A

**Veterinary Medical Technology**

How long and in what capacity have you known the applicant?

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How would you rate the applicant in overall ability, motivation, and promise for a career in veterinary technology?

| <b>4</b>                         | <b>3</b>                         | <b>2</b>  | <b>1</b>   | <b>0</b>  | <b>N/A</b>  |
|----------------------------------|----------------------------------|---|--|---|---|
| Equal to the best in any program | Will perform at a superior level | Performance should be average; equal to most undergraduate students | Qualifications are marginal; warrants further consideration (please explain below) | Questionable whether admission to the program is warranted (please explain below) | Not enough information to give informed judgement |

Remarks:

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Evaluator Signature

Date

Title

Highest Earned Degree

Telephone Number

Email address

**Thank you for your assistance.**