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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FORM A – Faculty/Staff Recommendation Letter Request –  DIETETIC INTERNSHIPS & GRADUATE PROGRAMS**  Attach your resume, personal statement, photocopy of your unofficial college transcripts (including your most recent UCD transcript), and the signed *“Authorization For Disclosure of Information.”*  **(Turn in to the Advising Department Office via e-mail (**[**nutforms@ucdavis.edu**](mailto:nutforms@ucdavis.edu)**)**  **by the first day of Winter Quarter (Spring Match) or August 15th (Fall Match))** | | | | | | | | | |
| Name: | | | | | Phone: | | | | |
| E-Mail: | | | | | Recommender: | | | | |
| Anticipated/Actual Graduation Date: | | | | | | | | | |
| Current GPAs: | | UCD:  Transfer:  Overall (UCD+transfer): | | \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_ | | DPD Overall:  DPD Professional:  DPD Science: | | \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_ | |
| **DATE OF FIRST DEADLINE**: | | | | | | | | | |
| **EARLY DEADLINE PROGRAMS ONLY**  **(BEFORE 2/15 or 9/25):**  **\*Check Box for Non-DICAS Programs** | | | | | **COURSES TAKEN FROM THIS INSTRUCTOR:** | | | | |
| 1. | **Deadline Date:** | |  | | **Course:** | | **Quarter/Year :** | | **Grade:** |
|  | Internship Name: | |  | |  | |  | |  |
|  | City, State: | |  | |  | |  | |  |
|  |  | |  | |  | |  | |  |
| 2. | **Deadline Date:** | |  | |  | |  | |  |
|  | Internship Name: | |  | | **OTHER INSTITUTIONS ATTENDED/DEGREES/CERTIFICATIONS:**  **(In Chronological Order)** | | | | |
|  | City, State: | |  | |
|  |  | |  | |  | | | | |
| 3. | **Deadline Date:** | |  | |  | | | | |
|  | Internship Name: | |  | |  | | | | |
|  | City, State: | |  | |  | | | | |
|  |  | |  | |  | | | | |
| **REGULAR DEADLINE PROGRAMS (2/25 or 9/25):**  **\*Check Box for Non-DICAS Programs** | | | | | **GRADUATE SCHOOL APPLICATIONS:**   1. Highlight any MS or DI/MS programs on the left 2. In addition to the list here, complete the list of graduate schools on the next page.  * Include name/type of degree pursuing (i.e., MS Nutr.) * Highlight program deadlines * Check box for online recommendation system * Provide any other pertinent information | | | | |
| 4. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | |
| 5. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | | **ATTACH PHOTO HERE (required):** | | | | |
| 6. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | |
| 7. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | |
| 8. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | |
| 9. | Internship Name: | |  | |
|  | City, State: | |  | |
|  |  | |  | |
| 10 | Internship Name: | |  | |
|  | City, State: | |  | |
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|  | Page 2 |

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| **GRADUATE SCHOOL PROGRAMS**  **\*\*Indicate Earliest Deadline at the top of Form A\*\*:**  **\*Check Box for Online Recommendation Systems** | | |
| 1. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |
|  |  |  |
| 2. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |
|  |  |  |
| 3. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |
|  |  |  |
| 4. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |
|  |  |  |
| 5. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |
|  |  |  |
| 6. | **Deadline Date:** |  |
|  | Program Name: |  |
|  | University: |  |
|  | Degree Pursuing: |  |
|  | Addressee: |  |
|  | Address: |  |
|  | City, State: |  |
|  | Additional Information: |  |

Page 3

Please rate yourself on the qualities listed below by checking the appropriate box.

O – Outstanding; MS - More than Satisfactory; SAT – Satisfactory; NI - Needs Improvement, U - unsatisfactory

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **O** | **MS** | **SAT** | **NI** | **U** |
| **A****pplication of Knowledge**  Nutrition Content |  |  |  |  |  |
| Medical Nutrition Therapy |  |  |  |  |  |
| Foodservice Management |  |  |  |  |  |
| **Analytical Skills/Problem Solving** |  |  |  |  |  |
| **Conceptual Skills** |  |  |  |  |  |
| **Communication Skills**  Oral |  |  |  |  |  |
| Written |  |  |  |  |  |
| **Interpersonal Skills**  Peers/Co-Workers |  |  |  |  |  |
| Teachers/Supervisors |  |  |  |  |  |
| **Leadership Potential** |  |  |  |  |  |
| **Initiative/Motivation** |  |  |  |  |  |
| **Punctuality** |  |  |  |  |  |
| **Adaptability** |  |  |  |  |  |
| **Reaction to Stress** |  |  |  |  |  |
| **Perseverance** |  |  |  |  |  |
| **Creativity** |  |  |  |  |  |
| **Organizational Skills** |  |  |  |  |  |
| **Works Independently** |  |  |  |  |  |
| **Responsibility/Maturity** |  |  |  |  |  |
| **Overall Potential as a Dietitian** |  |  |  |  |  |
| **Overall Potential as a Graduate Student (if applicable)** |  |  |  |  |  |

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| **List any work or volunteer experience that you have had. Indicate where you worked, when you worked there, and describe the work that you did. Include any foodservice management, clinical, or community nutrition work experience. Designate which positions were paid and which were volunteer/work-learn. Refer to resume if appropriate.** | |
|  | |
| **List any other information that will help the faculty member write a letter of recommendation. If you have chosen nutrition, foods, or other science courses as electives, list them here. If you have done any special projects or individual studies, describe them here. Indicate any special circumstances (illness, working part or full-time, commuting more than 20 miles/day, etc.) that may have affected your educational performance while you have been in school. List any special skills (computer programming, foreign languages, etc.) that you may possess.** | |
|  | |
|  | |
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| **List any extra-curricular activities in which you have taken part. Identify any leadership roles (i.e. officer, committee member, committee chair, etc.) that you have held. Include honor societies, student groups, religious organizations, youth groups, mentorships, and athletics.** | |
|  | |
| **Are there any specific reasons why you want to go to these particular internships / graduate schools?** | |
|  | |
|  | |
|  | Page 6 |
| **What are your plans and ambitions?** | |
|  | |
| **Explain why you feel that you should be accepted rather than another applicant.** | |
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|  | Page 7 |
| **List 5 adjectives that best describe you and why.** | |
| 1.  2.  3.  4.  5. | |
| **List two weaknesses or qualities that need further development.** | |
| 1.  2. | |

