500 Shaftesbury Blvd. Winnipeg MB CANADA R3P 2N2

Reference Letter 2

(from an academic professor or private instructor)

Bachelor of Music Therapy Program due by January 30, 2021 | email to: ldowsett@cmu.ca

Name of Applicant:							
How long have you known the applicant?							
In what capacity have	you known the	e applicant?					
Please rank the applic	ant relative to	students enterin	g the pre-profe	ssional progra	m of		
Please rank the applic Music Therapy.	ant relative to	students enterin	g the pre-profes	ssional prograi	m of		
	cant relative to Outstanding (upper 10%)	students enterin Above Average (upper 20%)	g the pre-profes Average (upper 40%)	ssional prograi Below Average	m of Unable to Judge		
	Outstanding	Above Average	Average	Below	Unable to		
Music Therapy. Personal maturity, ppropriate for training as	Outstanding (upper 10%)	Above Average	Average	Below	Unable to		
Music Therapy. Personal maturity, ppropriate for training as music therapist Ability to do imaginative problem solving in human	Outstanding (upper 10%)	Above Average	Average	Below	Unable to		

	Outstanding (upper 10%)	Above Average (upper 20%)	Average (upper 40%)	Below Average	Unable to Judge
bility to maintain rofessional standards of ractice as a therapist					
erbal and written ommunication					
verall evaluation of oplicant's academic ability elative to similarly trained ersons					
ersonal integrity					
Is there anything else y	you would like	us to know abou	it the applicant?	,	
Name of Reference (plea	ase print)				
Signature				Date	