

**University of Minnesota
Program of Mortuary Science
Fall 2017 Admissions**

***Letters of Recommendation
Instructions
Review of Applications will begin February 1, 2017***

Choosing Your Recommenders

The Program of Mortuary Science Admission Committee requires that you submit two letters of recommendation as part of your application for admission to the Program. Letters of recommendation are an important source of applicant information for the Admissions Committee. Care should be taken when considering who you will ask to write a letter of recommendation on your behalf. Be sure to seek out recommenders who you believe will take the time (and put forth the effort) to prepare a strong letter of recommendation on your behalf.

The individuals you choose to prepare letters of recommendation must know you well enough to objectively evaluate your qualifications as 1) a potential mortuary science student and 2) a future funeral director. At least one letter **must** be written by a supervisor, past or present employer, or a person holding a leadership position within a professional organization of which you are a member and/or have volunteered for/with within the past three years. It is preferred that your second letter also come from a supervisor, past or present employer, or a person holding a leadership position within a professional organization of which you are a member and/or have volunteered for/with within the past three years. One letter may also come from a faculty member at a college or university who has served as one of your professors, advisers, and/or work-study supervisors, within the past three years.

The Admissions Committee will not accept letters from individuals such as your co-workers, relatives, friends, or friends of the family, etc. Also, letters received from individuals whom you have known for fewer than three months will not be accepted.

To ensure the highest possible standards of academic integrity and professional conduct as part of the admissions process, be advised that we may contact your recommenders to verify the completion of their letter of recommendation. We may also seek to verify credentials of the individuals who prepare letters of recommendation as part of this application. Even if admitted to the Program, recommendation documentation may be verified at any time into the future. If it is determined that a letter of recommendation was in any way falsified, altered, or inaccurate, the applicant, if admitted, may face sanctions which include dismissal from the Program and/or having a degree rescinded by the University.

Review of Applications will begin February 1, 2017. If you have any questions please contact the Program office at mortsci@umn.edu or 612-624-6464.

Right of Inspection Waiver for Recommender #1

Federal Law requires that your Letter of Recommendation be available for inspection by you, the applicant, unless you have waived your right to inspection. You are required to check one of the lines below, as a means of indicating your wish to access your letters of recommendation:

Letter of Recommendation #1: Name of Recommender _____

_____ I waive my right of access to this letter of recommendation.

_____ I do not waive my right of access to this letter of recommendation.

I understand that the information contained in this letter of recommendation will be held in confidence both from me and the public to the extent permitted by law and that falsification of any documents submitted as part of this application can result in revocation of admission:

Name of Applicant _____

Applicant Signature _____ Date _____

Recommender Acknowledgement for Recommender #1

_____ (Applicant's name) is applying for admission to the Program of Mortuary Science at the University of Minnesota. The applicant has selected you as someone who can provide us with information on their professional abilities, work ethic, character, academic potential, and future promise as a funeral director. Please sign this form to indicate your awareness of the student's choice regarding right of access to your letter of recommendation.

Recommender Contact Information

Name of Recommender (print): _____

Recommender Signature: _____ Date: _____

Current Occupation and Job Title: _____

Name of Employer: _____

Employer Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Telephone: _____ Email: _____

How long have you known the applicant? _____ Years _____ Months

In what capacity have you, as recommender, been associated with the applicant?

Instructions for Preparing your Letter of Recommendation

Your letter of recommendation is an important part of the applicant's admission file. We respectfully request that you please take the time to craft a thoughtful letter in which you describe your overall impression of the applicant's suitability for work as a funeral director. Based on your knowledge of the applicant, please discuss your perception of her/his potential for working with grieving families who are experiencing the loss of a loved one. We would like to know how you believe the applicant's work ethic, character, and sense of empathy will contribute to their success as a funeral service professional. It would be most helpful if you cite specific examples of conduct that you have observed on the part of the applicant that you believe make him/her a strong candidate for work as a funeral director.

Please submit your letter of recommendation materials to the Admissions Committee using one of the following methods:

Via e-mail

Scan both a) the Recommender Contact Information (see previous page) and b) your **signed** letter of recommendation and send the documents as a pdf (Adobe) attachment to mortsci@umn.edu.

Via mail

Place both a) the Recommender Contact Information (see previous page) and b) your **signed** letter of recommendation in a single envelope, sign across the sealed flap, and mail the documents to:

Program of Mortuary Science
Attn: Admissions Committee
A275 Mayo, MMC 740
420 Delaware St. SE
Minneapolis, MN 55455

If you have any questions please contact the Program office at mortsci@umn.edu or 612-624-6464.

Right of Inspection Waiver for Recommender # 2

Federal Law requires that your Letter of Recommendation be available for inspection by you, the applicant, unless you have waived your right to inspection. You are required to check one of the lines below, as a means of indicating your wish to access your letters of recommendation:

Letter of Recommendation #1: Name of Recommender _____

_____ I waive my right of access to this letter of recommendation.

_____ I do not waive my right of access to this letter of recommendation.

I understand that the information contained in this letter of recommendation will be held in confidence both from me and the public to the extent permitted by law and that falsification of any documents submitted as part of this application can result in revocation of admission:

Name of Applicant _____

Applicant Signature _____ Date _____

Recommender Acknowledgement for Recommender # 2

_____ (Applicant's name) is applying for admission to the Program of Mortuary Science at the University of Minnesota. The applicant has selected you as someone who can provide us with information on their professional abilities, work ethic, character, academic potential, and future promise as a funeral director. Please sign this form to indicate your awareness of the student's choice regarding right of access to your letter of recommendation.

Recommender Contact Information

Name of Recommender (print): _____

Recommender Signature: _____ Date: _____

Current Occupation and Job Title: _____

Name of Employer: _____

Employer Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Telephone: _____ Email: _____

How long have you known the applicant? _____ Years _____ Months

In what capacity have you, as recommender, been associated with the applicant?

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