DENTAL & DENTAL HYGIENE APPLICANTS
Evaluation Form

3302 Gaston Ave., Room 525, Dallas, TX 75246 214.828.8231

To be filled in by applicant. Please type or print.

Applicant _____
Last   First   Middle

Address _____
Street   City   State   Zip

Applying for: _____ Dental School _____ Dental Hygiene School

Dental and Dental Hygiene Last 4 digits SS# – ☐☐☐☐

Dental only
TMDSAS ID# _____ or AADSAS ID# _____

I hereby voluntarily waive any right of access to this confidential evaluation.   I retain my right of access to this evaluation.

_____ _____ _____ _____
Date   Signature   Date   Signature

The remainder of this form is to be completed by the evaluator. When completed, mail the evaluation directly to:
Office of Recruitment and Admissions, A&M College of Dentistry, 3302 Gaston Ave., Rm. 525. Dallas, TX 75246.
PLEASE DO NOT RETURN TO APPLICANT.

A. Familiarity with applicant (how known, how long, and how well known?): _____

_____

_____

_____

_____

B. Please give your evaluation of the applicant's ability to perform as a student and in professional practice:_____

_____

_____

_____

_____

C. Additional Comments (other information which you consider beneficial to the Selection Committee): _____

_____

_____

_____

_____

D. Profile:

Complete by checking the boxes at the right which correspond to your evaluation of each characteristic.

Use categories in summary E

	7	6	5	4	3	2	1	0
Reliability – Accuracy, thoroughness, integrity, promptness, conscientiousness								
Motivation – professional promise, interest and enthusiasm								
Emotional Stability – Self-control, poise, judgement under challenging circumstances.................								
Social Values – Sensitivity to needs of others								
Intellectual Curiosity – Interest in learning, inquisitiveness								
Industry – Drive, initiative, work habits, performance								
Personality – Manners, courtesy, tact, enthusiasm, friendliness								
Leadership – Ability to inspire confidence, self-confidence, decisiveness, deliberation								
Cooperativeness – Respect for authority, ability to work with others, cultural competency................								

E. Summary Opinion:

Please check the category in which you would place this applicant regarding his/her overall suitability as an applicant.

☐ 7. *An excellent applicant.* Sound evidence that the applicant is in the upper 10% of predental students I have known.

☐ 6. *Well above average.* Probably in the upper 1/4 of predental students I have known.

☐ 5. *Above average.* Probably in the upper 1/3 of predental students I have known.

☐ 4. *Average.* Probably in the middle 1/3 of predental students I have known.

☐ 3. *Slightly below average.* Probably in the lower 1/3 of predental students I have known.

☐ 2. *Below average.* Probably in the lower 1/4 of predental students I have known.

☐ 1. *Very Poor.* Not recommended.

☐ 0. *Unknown.*

Evaluation by: Name (please type or print) _____

Title: _____
Phone Number

Address: _____
Street   City   State   Zip

Signature: _____   Date: _____

09/16