**Sample Joint Verification Letter for**

**Applicants to Spanish Language Psychological Services and Research Specialization**

*(Please add “SLPSR” to the subject heading when sending documents to cpsy.uoregon.edu)*

* Direct letter to Dr. Ellen McWhirter, Director, Spanish Language Psychological Services and Research Specialization (SLPSR)
* Email letter to [ellenmcw@uoregon.edu](mailto:ellenmcw@uoregon.edu) and copy to [cpsy@uoregon.edu](mailto:cpsy@uoregon.edu)

Dr. McWhirter,

This letter verifies that (*student name*) is currently enrolled in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (graduate program) and is a student in good standing with a current GPA of 3.0 or higher.

In addition, this letter verifies that (*name*) is performing well in pre-clinical and/or clinical work to date.

We have no concerns about (*name*)’s suitability for, enrollment in, or performance in the SLPSR specialization.

* *If this is not the case,* *please discuss your concerns with the student and if the student still wishes to enroll, describe any concerns you have about this student’s suitability for, enrollment in, or performance in the SLPSR specialization, or factors you think we should attend to if this student is admitted*:

(*Student name*)’s strengths and experiences relevant to the SLPSR specialization include \_\_\_\_\_\_\_\_\_\_.

* *(Please list; these should be provided by your student)*
* *(examples: growing up in a bilingual home; study abroad experience in a Spanish speaking country; experience working with Latina/o and/or Spanish speaking individuals, families, communities, etc.; commitment to multicultural competency development)*

We approve/do not approve of (*student name*)’s admission to the SLPSR specialization.

Respectfully,

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

Advisor name date

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

Clinical or Program director name date