

Recommendation Form

I. To the Applicant

Please provide the information requested on the top part of this form and then give this form, to an employer, faculty member, or to someone else who is in a position to comment on your professional and/or academic performance.

Applicant Name (Print)

Social Security Number

Program to which you are applying _____

Under the Family Education Rights and Privacy Act of 1974, admitted and enrolled students have the right to inspect and review their educational records. However, an applicant may waive the right to see confidential letters of recommendation.

- I waive my right to examine this form. I do not waive my right to examine this form.

Applicant Signature

Date

II. To the Recommender

The Stuart School of Business seeks your assistance in evaluating the applicant named on this form. We would greatly appreciate your candid appraisal of the applicant's abilities and potential for graduate study. Unless the applicant has signed the waiver above, we cannot guarantee that your comments will remain confidential. Please complete both sides of this form and return to the Office of Admission at Stuart School of Business.

Recommender Name (please print)

Organization Name

Title

Address

Telephone

E-Mail

A. How long have you known the applicant?

- Less than one year
 One to two years
 More than two years

B. In what capacity have you known the applicant?

- Student
 Employee under my supervision
 Business associate
 Friend
 Other (please explain) _____

C. Is the applicant's scholastic record an accurate index of his or her scholastic ability?

- Yes No Not applicable

If no, please explain:

D. Please rank the applicant in the following areas.

	Exceptional	Excellent	Good	Average	Poor	No Information
Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managerial promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination/Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works well independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meets deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works well under pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for analytical thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance in current position	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E. Please provide an overall recommendation for the applicant.

- Highly recommended
- Recommended
- Recommended with some reservations
- Not recommended

F. Please provide any additional information that may help us assess this applicant.

Recommender Signature

Date