Recommendation for:

Name:  [ ] Mr.  [ ] Ms.  __________________________ (Last)  __________________________ (First)  __________________________ (Middle)

Proposed major:  __________________________ Degree sought:  [ ] Ph.D.  [ ] M.S.

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1. Knowledge of the Applicant

Approximately how long have you know the applicant?  _____  Years

How well do you know the applicant?  [ ] Casually  [ ] Well  [ ] Very Well

What was the nature of your contacts with the applicant?

[ ] Teacher in Once Class  [ ] Teacher in More than One Class  [ ] Employer

[ ] Research Advisor  [ ] Major Advisor  [ ] Other  __________________________

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2. Relative Rating of the Applicant. Please rate the applicant in the areas indicated below by comparing him or her to the reference group you specify (college seniors, graduate students in the past 10 years, employees, etc.)

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<tr>
<th>Group:</th>
<th>Top 1-2%</th>
<th>Top 5%</th>
<th>Top 10%</th>
<th>Top 25%</th>
<th>2nd 25%</th>
<th>3rd 25%</th>
<th>Last 25%</th>
<th>Unable To Rate</th>
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<tr>
<td>Knowledge in subject of proposed study</td>
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<td>Ability to grasp new concepts</td>
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<td>Originality, intellectual creativity</td>
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<td>Mathematical and logical thought</td>
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<td>Written expression</td>
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<td>Laboratory skills (if applicable)</td>
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<td>Perseverance towards goals</td>
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<td>Potential as a teacher (if applicable)</td>
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<td>Potential in research (if applicable)</td>
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<td>Ability to get along with others</td>
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<td>Ability to analyze problems and form solutions</td>
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3. Some individuals demonstrate comparatively low achievement in scholastic records. In your opinion, is the applicant’s scholastic record indicative of his or her scholastic ability?

[ ] Yes  [ ] No  [ ] Don’t Know

If your answer is “No”, please explain briefly.

Continued on Page 2
4. Do you have any information related to character or temperament or to any impairments that should be considered by an admissions committee or should be taken into account in planning the student’s graduate work?

5. Please express your views on any of the items 1-4 and on any other relevant abilities about which you have knowledge (e.g., ability to organize and express ideas clearly, orally and in writing; accomplishments in thesis or published works).

6. Summary

☐ Recommend enthusiastically  
☐ Recommend with confidence  
☐ Recommend  
☐ Recommend with reservation  
☐ Not recommended

Signature: ________________________________

Name: ________________________________

Title: ________________________________

Department: ________________________________

Organization: ________________________________

City & State: __________________ Zip Code: ________

Date: ________________________________

Please return this recommendation form in a sealed envelope to the applicant so the he or she may enclose it in the application packet. Thank you.