Applicant’s Name __________________________________________

_____ I waive my right of access to this recommendation as it is used solely for the purpose of admission.

_____ I do not waive my right of access.

Applicant’s Signature ______________________________________ Date ______________________________________

To be completed by professor giving reference:

How long have you known the applicant and in what capacity? ___________________________________________________

Level of motivation for graduate study:

O Exceptional
O Good
O Fair
O Poor
O Weak in some respects such as:

O Not observed

Potential for conducting independent research:

O Outstanding
O Good
O Fair
O Poor
O Weak in some respects such as:

O Not observed

Oral communication:

O Exceptionally good
O Good to fair
O Difficult to understand
O No opinion

Written communication:

O Exceptionally good
O Good to fair
O Difficult to understand
O No opinion

Laboratory skills:

O Good
O Fair
O Poor
O Not observed

Integrity and honesty:

O Appropriate
O Poor
O Difficulties such as ____________
O Not observed

Potential for conducting independent research:

O Outstanding
O Good
O Fair
O Poor
O Weak in some respects such as:

O Not observed

Written communication:

O Exceptionally good
O Good to fair
O Difficult to understand
O No opinion

Work habits:

O Works at full capacity
O Works well, has reserve capacity
O Satisfactory, but not best performance
O Inclined to “get by”
O Not observed

Would you be pleased to have this person as a graduate student working in your research laboratory?

_____ Yes  _____ No  _____ Would hesitate because_________________

My recommendation to the doctoral level of graduate school is:

O Strong
O Moderate
O Marginal
O I do not recommend

Among about ________ students I have known in this field, I would rank this Applicant in the upper ________ percent.

Please attach a separate sheet with your evaluation of and your personal reaction to the applicant. Include any clarification for the previous ratings if you wish. Thank you for your time and effort.

Please print your name________________________________________
Signature________________________________________ Date_________________________________________________
Title____________________________________________ Institution____________________________________________
Department_______________________________ City_______________________ State________ Zip_________________
Phone_________________________________________________________________________________________________