



Minot State UNIVERSITY

Graduate School

LETTER OF RECOMMENDATION

TO THE APPLICANT: Three letters of recommendation are required for admission into Graduate School. Each form should be given to an individual who is familiar with your academic record and who is able to comment on your qualifications for graduate study. The complete letters must be sent to you and must remain sealed. Include them in your application packet. Please type or print legibly the following information before you deliver this form to your reference.

Applicant's Name _____ Phone # _____

Master's Program to which you are applying _____

In accordance with the Family Educational Rights and Privacy Act of 1974, you may waive your right to inspect this recommendation by signing the statement below. Should you decide not to waive the right, you will have access to this recommendation only if you admitted and enrolled at Graduate School at Minot State University.

I choose to waive my right of access _____
Signature of Applicant Date

I choose to not waive my right of access _____
Signature of Applicant Date

TO THE ACADEMIC REFERENCE: The Graduate School would appreciate a frank judgment from you concerning the applicant's qualifications for graduate study. Please mail this form in a separate sealed envelope to the applicant.

Number of years you have known the candidate _____ In what capacity did you know the candidate?

____ Faculty ____ Advisor ____ Administrator ____ Peer-student ____ Peer-professional ____ Other

Please apply the rating scale listed below to evaluate the student's ability to function in a graduate program based on the items A through J:

- 1 Low, would not function at a graduate level.
- 2 Below average, doubtful graduate ability.
- 3 Average, may be able to function at a graduate level, but may need special help.
- 4 Above average abilities, could function at a graduate if he/she applied himself/herself appropriately.
- 5 Excellent, no question as to ability.
- 6 Not applicable if you do not have information to make a judgment.

Criteria Items Please circle the most appropriate number (only one) utilizing the above scale for each criteria.

	Low	Average			Excellent	NA
A. Critical thinking (ability to comprehend and make logical deductions from written and oral material)	1	2	3	4	5	6
B. Reading ability	1	2	3	4	5	6
C. Language usage-oral	1	2	3	4	5	6
D. Language usage-written	1	2	3	4	5	6
E. Research skills	1	2	3	4	5	6
F. Interpersonal skills	1	2	3	4	5	6
G. Ability to benefit from criticism	1	2	3	4	5	6
H. Knowledge and application of clinical skills	1	2	3	4	5	6
I. Dependability	1	2	3	4	5	6
J. Academic achievement	1	2	3	4	5	6

Please use the reverse side of this form for any additional comments you feel will help Minot State University make the best possible judgment regarding the candidate's motivation and abilities to complete a graduate degree.

We would appreciate your comments on the on the applicant's abilities, and outstanding talents. In addition, do not hesitate to inform us of any weaknesses in the applicant which would significantly impair his or her performance in Graduate School.

Check only one:

I recommend without reservation I recommend I recommend with reservation I do not recommend

Reference's Signature _____ Date _____

Position/Title _____ Institution _____

Address _____ Contact Phone # _____