

STOCKTON UNIVERSITY | GRADUATE STUDIES

Graduate Applicant Recommendation Form

NOT FOR DPT, MSCD or MSOT APPLICANTS

TO BE COMPLETED BY THE APPLICANT

To attest to your skills and potential abilities as a graduate student, three letters of reference along with this recommendation form are required. The letters should be written by those who can verify your experience and attest to your academic excellence (college/university professor familiar with your academic performance, work or volunteer supervisor or current employer). Recommendations from relatives, friends or coworkers will not be accepted. The letters of reference **along with this form** must be returned by, and/or postmarked prior to the stated deadline.

Student Name: _____ **Login E-mail or Z#** _____

Program of Study: _____ **Desired Admit Term:** _____

Phone: _____ **E-mail:** _____

Under the FERPA Act of 1974, you have the right to review official college student records. You may waive that right, if you wish to do so in the case of this letter of recommendation, by choosing that option and signing here. Your waiver will in no way affect the decision on your application.

- I wish to review this recommendation and/or any attached letters
 I waive this right and do not wish to review this recommendation and/or attached letters

Signature of Applicant: _____ **Date:** _____

TO BE COMPLETED BY THE RECOMMENDER

When you have completed and signed this recommendation form, **send it along with your letter**, seal the envelope, sign your name across the sealed flap, and return the recommendation to the applicant. Or if you prefer, you can mail it directly to the Office of Graduate Studies. Based on your observation, how do you rate the applicant on the following characteristics in comparison with other students with the same level of training?

Criteria	Outstanding	Above Satisfactory	Satisfactory	Unsatisfactory	No Basis For Judgment
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work With Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to Accept Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation for Graduate Study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Adjustment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Originality and Creativity	<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"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For how long and in what capacity have you known the applicant? _____

Write a letter including any attributes of maturity, personality, motivation, and aptitude which will further describe the applicant and **attach it to this form**.

I enthusiastically recommend recommend recommend with reservations do not recommend this applicant for graduate study.

 Recommender's Name (please print)

 Position/Title/Department

 School/Company

 Work Phone and E-mail Address

 Address

 City, State and Zip Code

 Recommender's Signature

 Date