

Candidate Recommendation Form

I, _____, voluntarily waive decline to waive (check one)
(Applicant's name)

my right under the Family Education Rights and Privacy Act of 1974 to review or examine this recommendation form.

(Signature of applicant)

(Date)

The above applicant is applying for admission to the Higher Education and Student Affairs Leadership Program at the University of Northern Colorado. We are interested in receiving your frank assessment of the applicant's abilities and qualifications for graduate study.

In accordance with the Family Educational Rights and Privacy Act of 1974, students who are admitted may be given access to this form upon request, unless they have voluntarily and explicitly waived their rights to do so above.

1. In your judgment, please rank the applicant's ability and competence below. (Please check one rating for each category.) As compared to other individuals who have been successful graduate students, this candidate is...

Characteristic	Outstanding Top 10%	Very Good Top 1/3	Average Middle 1/3	Below Average Bottom 1/3	Inadequate Basis for Judgment
Intellectual Ability					
Maturity/Stability					
Judgment/Problem-Solving					
Oral Communication					
Written Communication					
Independence/Self-Direction					
Dedication to Social Justice					
Motivation/Commitment					
Creativity/Originality					
Flexibility/Adaptability					
Sense of Humor					
Research Experience					
Analytical Skill					
Integrity					
Overall Rating					

2. **In a separate letter**, please indicate a) how long, how well, and in what context you have known this applicant; b) how you would assess this applicant's overall potential for success as a graduate student and as a practitioner in the field of student affairs; and c) any information about the applicant's previous academic achievements and involvement working with college students.

Thank you for your participation.

Name (please print): _____ Title: _____

Signature: _____ Date: _____

Institution: _____

Address: _____

City, State, Zip: _____

Telephone: _____ E-mail: _____

Please return this form to the address below.