Department of Chemistry and Biochemistry

Letter of Recommendation for Graduate Study

**To the Applicant**

Only people who are familiar with your qualifications for graduate study should be asked for a recommendation letter. Three letters of recommendation are required for all degree programs within the Department of Chemistry and Biochemistry

1) Complete the top half of this form.

2) Print a copy for each reference.

3) Give him or her a stamped envelope addressed as follows:

Graduate School and International Admissions

Campus Box 135

University of Northern Colorado

Greeley, CO 80639-0064

Applicant’s Full Legal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree program to which you are applying (circle below):

M.S. – Chemistry (research emphasis)

M.S. – Chemistry (education emphasis)

Ph.D. – Chemical Education

In accordance with the Family Education 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 the recommendation if you enroll in the above degree program.

I choose to: \_\_\_\_\_\_waive \_\_\_\_\_\_ not waive my right of access to this letter

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**To the Person Providing Reference/Recommendation**

Please type your letter of recommendation on letterhead, mail both this form and your letter directly to the address above. Please sign the envelope across the seal. This recommendation will be used by the Department of Chemistry and Biochemistry only in its procedures related to admission and assistantships. If the student has not waived the right of access to the recommendation, it will be accessible to the student only if he/she enrolls in the above-referenced degree program at the University of Northern Colorado.

**In your letter:**

Please specify how long and in what capacity you have known the applicant.

Write as candidly as possible about the applicant’s qualifications and potential to carry out advanced studies in chemistry or chemical education at the degree level specified.

In evaluating such qualities as the applicant’s reliability, motivation, chemistry knowledge, and maturity, discuss both strengths and weaknesses. It would be most helpful if you can describe specific instances in which these qualities were revealed to you.

If it is possible for you to compare this student with others you have recommended for graduate study, please do so.

Thank you for your assistance.

Please use the table below to compare this applicant to other individuals you have recommended for graduate study.

**Please qualify very high (top 5%) or very low (bottom 50%) rankings in your letter.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Top 5% | Top 10% | Top 25% | Top 50% | Bottom 50% | N. A. |
| Reliability |  |  |  |  |  |  |
| Motivation |  |  |  |  |  |  |
| Chemistry Knowledge |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |
| Written Communication Skills |  |  |  |  |  |  |
| Oral Communication Skills |  |  |  |  |  |  |
| Potential for Success in Graduate School |  |  |  |  |  |  |

**Reference/Recommender Details**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_