GRADUATE RECOMMENDATION FORM

Recommender Name:

Applicant Name:

Using the scale listed below, please indicate how the applicant ranks in relation to other students employees. Please add any additional comments that support your ranking for that item.		
 Superior Above average Average Below average Unsatisfactory Not able to assess 		
R	Rank: 1-5	Comments:
Cognitive Ability		
Leadership		
Dependability/Reliability		
Timeliness/Follow-through		
Research/Scholarship Potential		
Critical Thinking		
Professional Behavior		
Oral Communication		
Written Communication		
Interpersonal Relationships		
Overall, how would you rate this applicant?		
We welcome additional comments that could attest to this individual's capacity for success in graduate school. Please make any additional comments below:		