Please fill out the following information and/or write a letter of recommendation.

Please describe the particular talents, strengths, and weaknesses of the applicant. If you have worked with the applicant on any sort of special project, please give an evaluation of his or her performance. Please indicate any favorable or unfavorable indications of individual (or team) research potential and the ability of the applicant to do independent work. Please include any additional information that you believe is relevant.

Respondent Information (Please type or print.)

Name					
Title or position					
Affiliation					
Address					
Telephone	_ FAX #				
•					
Signature	- Date				
Thank you for taking the time to respond. Recommendations are among the most valuable data used in the selection process.	Please respond before the application deadline noted on reverse.				
Carnegie Mellon	Mail this form directly to:				
	Graduate Admissions				
	College of Engineering (obtain department name from applicant information section				
	Conege of Engineering				
http://www.cit.cmu.edu/	Carnegie Mellon University				

Pittsburgh, PA 15213-3890

Carnegie Mellon University does not discriminate and Carnegie Mellon University is required not to discriminate in admission, employment or administration of its programs or activities on the basis of race, color, national origin, sex or handicap in violation of Title VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973 or other federal, state or local laws, or executive orders.

In addition, Carnegie Mellon University does not discriminate in admission, employment or administration of its programs on the basis of religion, creed, ancestry, belief, age, veteran status, sexual orientation or in violation of federal, state or local laws, or executive orders. However, in the judgment of the Carnegie Mellon Human Relations Commission, the Department of Defense policy of "Don't ask, don't tell, don't pursue" excludes openly gay, lesbian and bisexual students from receiving ROTC scholarships or serving in the military. Nevertheless, all ROTC classes at Carnegie Mellon University are available to all students.

Inquiries concerning application of these statements should be directed to the Provost, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA 15213, telephone (412) 268-6684, or the Vice President for Enrollment, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA 15213, telephone (412) 268-6684, or the Vice President for Enrollment, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA 15213, telephone (412) 268-6684, or the Vice President for Enrollment, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA 15213, telephone (412) 268-2056.

Obtain general information about Carnegie Mellon University by calling (412) 268-2000.



Fall Semester begins in mid-August; application deadline is February 1. (January 15 for ECE) **Spring Semester** begins in January; application deadline is September 30. (All departments)

Recommendation for Admission to Graduate Study

Note: If possible, this form should be returned by the applicant with all other application materials. It may also be mailed by the respondent. In either case, the respondent should sign over the sealed envelope flap.

This section to be completed by the applicant

Family Education Rights and Private Rights Act of 1974 (FERPA)

Under the provisions of this act you have the right, if you enroll at Carnegie Mellon, to review your educational records. The act further provides that you may waive your right to see recommendations for admission. Please indicate below, by circling the appropriate phrase and signing your name, whether or not you wish to waive this right.

I waive do not waive any right of access that I may have to this Recommendation Form.

Name of applicantLast name (fam	ily name/surname)		First name	Middle initial/name
I am applying for admission to the De	epartment of			at Carnegie Mellon University.
Applicant's signature				
Name of person providing this recom	mendation			
Title		Affiliation		

This section to be completed by the respondent

How long have you known the applicant and in what capacity?

In making this evaluation, what group are you using as a basis for comparison?

Please rank the student, as well as you can, along the listed dimensions. (Note that the scale is nonlinear.) Feel free to check "Insufficient Information" if you cannot make a judgment.

	Top 1%	5%	10%	20%	50%	Below 50%	Insufficient Information
Motivation and initiative							
English communication skills							
Creativity							
Intellectual ability							
Overall potential for graduate study							