College of St. Joseph in Vermont

Recommendation for Graduate Study in:

□ Education □ Psychology & Human Services □ Business Administration

Name of Applicant_____

To the Applicant:

This form should be given to professors and/or supervisors who are able to comment on your qualifications for graduate study and/or potential for professional growth in the program checked above. For the convenience of the person completing this form, please include a stamped envelope addressed to:

> **College of St. Joseph Admissions Office** 71 Clement Road Rutland, VT 05701-3899

Under the Federal Family Educational Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation. However, those writing recommendations and those assessing recommendations may attach more significance to them if it is known that they will remain confidential. It is your option to waive or retain your right to access these recommendations.

To be acceptable, this form must have the appropriate phrase below marked and your signature.

I waive my right to review this recommendation

I do not waive my right to review this recommendation

Date:_____Signature:____

To the Evaluator:

The above-named individual is applying for admission to a master's program in Education, Psychology, or Business Administration (see above) at the College of St. Joseph and would appreciate your evaluation of her/his academic/professional work on the enclosed form. Please indicate whether you are writing an academic recommendation or a professional recommendation.

Academic	Professional			
I have known the appl I have known the appl I have known the appl		months fairly well as a supervisee	□very well □other	

Indicate the population with which the applicant is being compared in this rating:

Undergraduate students DBachelor's level employees DMaster's level students DMaster's level employees I have supervised I have taught I have supervised I have taught

According to the population specified in the last item, rate the applicant on the following characteristics. If, in your opinion, any of the ratings require further elaboration, please include them along with other comments in a personal letter of recommendation.

Rating	Below Average	Average	Very Good	Outstanding	No Basis for Evaluation
Academic Ability					
General Knowledge					
Oral Expression					
Writing Ability					
Originality					
Social Awareness					
Emotional Maturity					
Ability to Work With Others					
Ability to Meet Deadlines					
Leadership Ability					
Persuasive Ability					
Independence/ Autonomy					

Rating	Below	Average	Average	Very Good	Outstanding	No Basis for Evaluation
Professional Demeanor						
Interpersonal Skills						
Dependability						
Carefulness						
Judgment						
Tolerance for Differences						
Tolerance for Ambiguity						
Cultural Awareness						
Self-Awareness						
Adherence to Ethical Standards						
Persistence						

We would appreciate some personal comments on this student. Feel free to put these comments in the space provided on this form (use separate sheet if necessary). We are particularly interested in your opinion regarding the following:

- 1) The applicant's ability to profit from a master's program
- 2) The applicant's level of personal maturity and character
- 3) The applicant's potential for ethical decision making, leadership, and competence in his/her area of professional interest.

My overall recommendation of the candidate:

□Highly recommended □Recommended with some reservation □Not recommended

Signature of person completing this form

 Name (please print)
 Title:

Institution or affiliation: _____ Phone: ()_____