UH Downtown
College of Science & Technology   MSDA Applicant Reference Form
Coordinator of MS in Data Analytics

TO THE APPLICANT: Complete *Section I* below and forward this MSDA applicant reference form to the individual (evaluator) who will provide the reference. Please advise the evaluator to submit the completed MSDA applicant reference form in .pdf file format to gradadmissions@uhd.edu. Upon receipt the MSDA applicant reference form becomes the property of UHD and will not be returned. In addition, UHD reserves the right to verify all MSDA applicant reference forms with the evaluator.

TO THE EVALUATOR: Complete *Section II* and email the completed MSDA applicant reference form from your email account in .pdf file format to gradadmissions@uhd.edu. If you need to use additional pages submit them in .pdf file format with the MSDA applicant reference form. Your candid completion of this MSDA applicant reference form is greatly appreciated. You can be assured that this MSDA applicant reference form is completely confidential and will not be shared with the applicant, provided the applicant has waived their rights to review it.

SECTION I (to be completed by MSDA applicant)

Name: _____ Date of Birth _____/_____

          Last   First   MI   Month/ Day

Current Address_____

                    _____

ALL MSDA APPLICANTS MUST READ AND SIGN THIS AUTHORIZATION FOR WAIVER*:

I understand my right under the U. S. Family Educational Rights and Privacy Act of 1974 to review confidential appraisals placed in my file that are submitted with reference to admission to a graduate or other school.

I ☐ do ☐ do not (you must check one) waive my right to review this MSDA applicant reference form.

Applicant's Signature _____ Date _____

Agreeing to waive your right to review this MSDA applicant reference form is not required as a condition of admission to the UHD MSDA program.

SECTION II

Name of evaluator _____

The length of time you have known the applicant: _____ Years

The capacity in which you have known the applicant (check all that apply):

☐ Employer / Supervisor

☐ Professor

☐ Other (please specify) _____.

What was the nature of the applicant's duties (briefly describe)?

_____

_____

With whom are you comparing this applicant on the factors listed below (check only one)?

☐ Employees I know with similar duties and education;

☐ All persons reporting to me

Please evaluate the applicant, in comparison with the group identified above, as fairly as you can, by checking only one box on each of the characteristics listed below:

	Top 5%	Top 10%	Top 25%	Top 50%	Bottom 50%	Unable to Judge
Creativity	☐	☐	☐	☐	☐	☐
Intellectual ability	☐	☐	☐	☐	☐	☐
Maturity/emotional stability	☐	☐	☐	☐	☐	☐
Teamwork ability	☐	☐	☐	☐	☐	☐
Demonstrated leadership skills	☐	☐	☐	☐	☐	☐
Leadership potential	☐	☐	☐	☐	☐	☐
Writing ability	☐	☐	☐	☐	☐	☐
Oral communication ability	☐	☐	☐	☐	☐	☐
Critical thinking ability	☐	☐	☐	☐	☐	☐
Acceptance of feedback	☐	☐	☐	☐	☐	☐
Motivation to succeed	☐	☐	☐	☐	☐	☐
Integrity	☐	☐	☐	☐	☐	☐

What do you consider to be the applicant's major strengths?

In what area(s) does the applicant need further development?

SUMMARY EVALUATION (check only one):

☐ I **strongly recommend** this person for admission to the UHD MSDA program and believe they have the capacity to perform at a superior level.

☐ I **recommend** this person for admission to the UHD MSDA program and believe they have the capacity to perform at a superior level.

☐ I believe this person's qualifications for the MSDA program are **marginal** but they may have the potential to benefit from MSDA study.

☐ I **do not recommend** this person for admission to your MSDA program.

Evaluator's signature _____ Date: _____

The College of Science & Technology realizes providing a reference requires time and effort. We would like to take this opportunity to thank you for your assistance.
Please complete the following contact information:

Name _____ Position _____

Company: _____

Work Address: _____

Telephone: _____

Email Address: _____