

Texas A&M University – Corpus Christi
MASTER OF ARTS IN STUDIO ART
Confidential Reference Form

Part 1. to be completed by the applicant

Last Name	First Name	MI	SS#
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E-mail address	Phone #
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Home Address	City	State	Zip Code
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Permission and Waiver Statement

I hereby authorize the reference named below to complete this personal evaluation form as part of the graduate application process at Texas A&M University – Corpus Christi, with the understanding that I will not have access to the results of the evaluation.

Signature	Date
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Part 2. To be complete by the Reference

Last Name	First Name	Title
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Business Address	City	Sate	Zip Code
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School	Business Telephone
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Please complete the evaluation form that appears on the back of this form carefully and candidly. Rest assured that your evaluation will not be shares with the applicant. This applicant shoul have waived the right to examine your responses. **If the Permission and Waiver Statement has not been signed, you should not complete this form.**

**Confidential Reference Form
Part 2. (Continued)**

How many years have you known the applicant? _____

How long has it been since you had the student in class? _____

What course or subject did you teach the applicant? _____

Consideration will be given to an applicant's academic record and the following attributes and achievements. Please rate the applicant's relative standing among other students with whom you have had contact on each of the traits listed below. Use the rating scale identified below.

Rating Scale

5	Superior (Top 10%)	90-99%
4	Outstanding (Top 25%)	75-89%
3	Above Average (Top 40%)	60-74%
2	Average (Middle 40%)	40-59%
1	Below Average (bottom 40%)	01-39%
X	Inadequate Opportunity to Observe	0%

Enter the appropriate number based on the rating scale and the designated qualities.

_____ Aptitude for advanced studio work

_____ Analytical ability

_____ Leadership

_____ Writing Ability

_____ Integrity and Moral Character

_____ Special talents and abilities (specify)

_____ Ability in interpersonal relations

Other Comments: _____

Reference Signature

Date

**Faculty should submit the completed form to the Dept. of Art Graduate Coordinator
DO NOT GIVE TO THE APPLICANT**

