



To the Applicant

Each recommendation must include the completed Reference Form as well as a separate letter from your recommender written and signed on academic or business letterhead stationery .

Please enter the applicant's and recommender's information requested below. Then deliver or mail the reference forms to the three persons who will write recommendations for you. After the recommendation is written, this form and the letterhead recommendation should be sealed in an envelope, signed across the seal, and mailed to SMF Admissions, Fisher College of Business, 100 Gerlach Hall, 2108 Neil Ave., Columbus, OH 43210.

Applicant's Information

Name: _____
Last or Family Name/Surname First Middle Date of birth

Address: _____

E-mail address: _____

Major field of study: FINANCE

If you have had contact with a faculty member at Ohio State regarding graduate study, please indicate the following:

Faculty contact's name Department

Recommender's Information

Name: _____

Title: _____ Institution: _____

Address: _____

Phone: _____ FAX: _____ E-mail: _____

IMPORTANT: At least one direct contact number must be supplied, for verification purposes.

If this is an academic reference, please list the courses you have taken under the direction of this recommender:

Course Number	Course Title	When Taken	Grade

Applicant's Waiver of Right to Access

The Family Educational Rights and Privacy Act of 1974, as amended (P.L. 93-380), allows a candidate for admission, employment, or receipt of honors to waive his or her right of access to confidential letters or statements written on his or her behalf if the recommendation is used solely for the purposes of admission, employment, or the receipt of honors and if the candidate, upon request, is notified of the names of all persons making such recommendations on his or her behalf. The university does not require that you make such a waiver as a condition for admission or award of fellowship or associateship. However, under the legislation you have the option of signing such a waiver as follows:

I hereby waive my right to access to this recommendation and any appropriate attachments which have been written by _____ (insert name of recommender) on behalf of my application to the Graduate School, The Ohio State University, and for award of a fellowship or associateship, if applicable. This waiver is effective insofar as the recommendation is used solely for the purpose of admission or award of fellowship or associateship, if applicable.

Printed Name: _____ Date: _____ Signature: _____

(continued)



To the Recommender:

Please return this reference form and the accompanying letter to SMF Admissions, signed across the seal.

The person whose name appears below is applying for admission to a rigorous program leading to the SMF degree. Your candid assessment of the applicant will greatly assist us in making a decision that is good both for the applicant and the program. Please complete this **Reference Form along with a separate recommendation letter** written and signed on your **official academic or business letterhead stationery**. We appreciate the time and effort you are making to provide us with this information.

Applicant's Last or Family Name/Surname _____ First _____ Middle _____

1. What is your relationship with the applicant? Teacher/Professor Employer/Supervisor Coworker/Colleague Other _____
I have known this applicant for approximately _____ years _____ months

2. Do you know the applicant well enough to give him/her a recommendation? Yes No
(If you checked NO, you do not need to complete the rest of this form.)

3. SUMMARY EVALUATION

Compare the applicant with a representative group of students with similar experience and training in the same field. How do you rate the applicant on educational and/or professional ability? (Check one.)

- outstanding (highest 5%)
- very good (highest 10%)
- good (upper 25%)
- average (upper 50%)
- below average (lower 50%)

4. RECOMMENDATIONS

I would make the following recommendation for the applicant's admission to the program and degree listed on the first page of this form:

- strongly recommend
- recommend
- recommend with reservations
- do not recommend

5. Some individuals do not perform to their potential. Is the applicant's scholastic record, as you know it, an accurate index of his/her ability?

- Yes No Don't know

(If you checked NO, please explain why in your recommendation letter.)

6. RECOMMENDATION LETTER INSTRUCTIONS

- a. Use only clearly identified, **official academic or business letterhead paper**. **This letter must be signed by you.**
- b. Include the applicant's name on each page of the letter.
- c. Attach your letter to this *Reference Form*, seal in an envelope. Sign across the letter flap and return to SMF Admissions.
- d. Describe the applicant's qualifications for graduate study. Please include additional information to explain your ratings from the chart below and offer a candid assessment that will help us make a decision that is good for both the applicant and the Fisher SMF program. Please rate the applicant on the following characteristics by checking the appropriate box.

	Exceptional	Good	Average	Poor	Unknown
Communication & Interpersonal Skills					
Creativity					
Curiosity					
Empathy					
Endurance					
Global Awareness					
Integrity					
Passion					
Self-Awareness					
Vision					
Overall Rating					

e. What do you consider to be the applicant's weaknesses?

Recommender, please read and sign below:

I have read the recommender information on the front of this *Reference Form*, including the direct contact number and have made any necessary corrections. **My preferred direct contact number is:**

Phone: _____ Phone (cell) _____ E-mail _____

Printed Name: _____ Signature: _____