UNIVERSITY OF ONTARIO
INSTITUTE OF TECHNOLOGY
GRADUATE STUDIES

Graduate Admissions
Office of Graduate Studies
University of Ontario Institute of Technology
2000 Simcoe Street North
Oshawa, ON L1H 7K4
T 905.721.8668
Email to: gradapps@uoit.ca
www.gradstudies.uoit.ca

Section A **TO BE COMPLETED BY *APPLICANT* (please print clearly):**

_____

Legal Last Name   **Legal Given Name(s)**

_____

Address

_____

E-mail Address   **Intended Program of Study**

Section B **TO BE COMPLETED BY *REFEREE*:**

The above applicant has applied for admission to graduate studies at the University of Ontario Institute of Technology (UOIT).
Your completion of this confidential appraisal form (and/or attached letter) is extremely important to our assessment of the application.
Knowledge of the applicant's ability must be within the last two years. Please ensure that all information is accurate.

This form may be returned in the following ways:
 1. By e-mail - If you are using your work e-mail address or academic/university e-mail address, you may e-mail a completed copy of this form to gradapps@uoit.ca. For the subject line, please indicate the Last Name, First Name of the Applicant - Letter of Recommendation.

 2. By Mail - Please mail the completed form to the address above. The envelope should include the logo of your place of employment/academic institution.   You must sign over the sealed envelope flap.

Name _____

Position _____

Institution/Employer _____

Telephone _____ **E-mail Address *** _____

* E-mail Address - Please note that UOIT Graduate Studies only accepts place of employment/academic institution e-mail addresses.

How long have you known the applicant?   _____Years   _____Months

When did you know the applicant? (indicate which month/yr(s) from _____to _____

What is your relationship to the applicant?   ☐ **Instructor**   ☐ **Other** _____

1. Please indicate your judgment of the applicant by placing a checkmark in the space that most closely represents the student's ability. Please rank the applicant among a group of students at a similar stage in their education.

	TOP 5%	TOP 10%	TOP 20%	TOP 50%	LOWER 50%	UNABLE TO EVALUATE
Background Preparation	○	○	○	○	○	○
Originality	○	○	○	○	○	○
Research Ability and Potential	○	○	○	○	○	○
Industriousness	○	○	○	○	○	○
Judgment	○	○	○	○	○	○
Overall Scientific Ability	○	○	○	○	○	○
Oral and Written Communication	○	○	○	○	○	○
Ethical Behaviour	○	○	○	○	○	○

If you require this information in an alternate format due to disability, please email gradstudies@uoit.ca

2. ADDITIONAL INFORMATION

a) Please provide additional information on the applicant's abilities and potential for graduate work.

b) Comment on the applicant's character and personality (leadership, reliability, how s/he works with others, etc.

c) Would this applicant be accepted to your own graduate program?

☐ Yes

☐ No

☐ Not Applicable - I am not employed by a post-secondary institution.

3. Recommendation for admission to the graduate program of interest.

☐ Strongly Recommend

☐ Recommend

☐ Recommend with Reservation

☐ Do Not Recommend

4. Recommendation for awarding a Research Assistantship. *

☐ Strongly Recommend

☐ Recommend

☐ Recommend with Reservation

☐ Do Not Recommend

** Research assistantships are designed to support students engaged in research activities under the supervision of a faculty member.

Signature of Referee _____   **Date** _____