

ST. MARY'S UNIVERSITY



RECOMMENDATION FORM

(This applicant should fill in his/her name and proposed field of study and give the form to a person well acquainted with his/her ability and education.)

Last Name First Name Middle Initial Social Security Number [when applicable]

is applying for admission to the Graduate School, in the program of:

The Graduate Council will appreciate an estimate of the applicant's aptitude for graduate study and promise of professional success.

How long and in what capacity have you known the applicant? _____

Please list here your evaluation of the applicant:

Integrity: _____

Character and personality: _____

Emotional maturity: _____

Native intellectual ability: _____

Breadth of general knowledge: _____

Initiative and resourcefulness: _____

Oral communication ability: _____

Written communication ability: _____

Other observations and recommendations:

Would you recommend the applicant for admission to Graduate School? _____

Name _____ Position _____

Address _____ Date _____

Please return this recommendation directly to the address below.

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GRADUATE SCHOOL
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