Part A: TO BE COMPLETED BY THE APPLICANT

Last Name (please print) First Middle Initial

Degree and/or Certification/Certificate Program to which you are applying

PA RIGHT TO KNOW STATEMENT:
ALL APPLICANTS MUST READ AND SIGN THIS AUTHORIZATION FOR WAIVER*:

I understand my rights under the PA Right to Know Law and 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 ☐ I do not waive my right to review this recommendation.

Applicant’s Signature ________________________________ Date _______________________

*Agreeing to waive your right to review this recommendation report is not required as a condition of admission to graduate study.

Part B: TO BE COMPLETED BY THE RECOMMENDER

We would appreciate your assessment of the applicant’s academic and professional promise. Your ranking of the applicant on the following characteristics will be one of several criteria used in making an admission decision. Please use this rating scale.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>5 - outstanding</th>
<th>4 - above average</th>
<th>3 - average</th>
<th>2 - below average</th>
<th>1 - poor</th>
<th>0 - no basis for judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to express himself/herself orally . . . in writing</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Emotional Maturity</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Initiative</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Intelligence</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Potential for Service in the Field</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Seriousness of Purpose</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

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

Directions to the Applicant

If you are using the paper based recommendation process, please provide a stamped self-addressed envelope to the recommender with this form. Once you have received three letters of recommendation in their sealed envelopes, please forward them directly to the College of Graduate and Professional Studies. These letters of recommendation will be held in confidence by the University and will be used only in the admission decision process.

RECOMMENDATION FOR ADMISSION TO GRADUATE STUDIES

Directions to the Applicant

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SUMMARY EVALUATION: Please address the candidate's strengths and weaknesses as they relate to graduate study. You may use the space provided below or attach a separate document.

Please return this completed form in a sealed envelope directly to the applicant.

______________________________
Signature

______________________________
Printed Name

______________________________
Position and Institution

______________________________
Email Address

______________________________
Mailing Address