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>Ability to express himself/herself orally</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></td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
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<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? ________________________________________________________

__________________________________________________________________________________________________________
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