

Graduate Programs Office
 College of Business Administration
 University of Cincinnati
 PO. Box 210020
 Cincinnati, OH 45221-0020, USA

Applicant's Name

last first middle

The Family Educational and Privacy Act of 1974 opens many student records for the student's inspection. The law also permits the student to sign a waiver relinquishing his/her rights to inspect letters of recommendation. The applicant's signature below constitutes a waiver; no signature means the student will have the right to read this recommendation.

Signature of Applicant _____ **Date** _____

Note to recommender: When you have completed the recommendation form, place it in an envelope, sign your name across the seal and return it to the applicant. The applicant will then submit the sealed envelope to the Graduate Programs Office as part of the application process. Please accept our thanks for your help in assessing the applicant's qualifications.

How Long Have You Known the Applicant? **In What Capacity?**

Please Rate the Candidate's Ability of Level in the Following Areas:

| | Superior | Above Average | Average | Below Average | Unable to Judge |
|--------------------------------|----------|---------------|---------|---------------|-----------------|
| skill in written communication | | | | | |
| skill in oral communication | | | | | |
| mathematical aptitude | | | | | |
| intellectual aptitude | | | | | |
| maturity level | | | | | |
| motivation level | | | | | |
| ability to work with others | | | | | |

strongly recommend recommend recommend with reservations do not recommend

Please type your evaluation in the space provided or feel free to provide this information on a separate page.

I Understand the Applicant May Have Access to This Information Unless the Waiver Statement is Signed.

| | | |
|---------------------------------|--------|----------------|
| Signature of Recommender | | date |
| first | middle | last |
| position/title | | firm or school |

| | | |
|----------------|--------|-----|
| Address | | |
| number | street | |
| city | state | zip |
| telephone | | |