Please return to:
Gonzaga University
School of Education
Graduate Admissions
502 E Boone Ave AD 25
Spokane, WA 99258-0025
Fax: *(509) 313-3491*

School of Education

GONZAGA UNIVERSITY
SCHOOL OF EDUCATION

Confidential Recommendation

Part 1 (to be completed by applicant)

Student Name _____ Former Name: _____
Last First M. Initial

SS#/SIN# _____ **Program of Study** _____

In accordance with the Family Education Rights and Privacy Act of 1974, I hereby: (If neither is selected form is considered confidential)

- o Waive access to this recommendation which shall therefore be considered confidential.
- o Do not waive access to this recommendation.

Signature _____ **Date** _____

Part 2 (to be completed by the person acting as a reference for the applicant)

In order to help evaluate this applicant's qualifications for graduate study, your opinion is requested. Please print neatly or type and return it directly to the address located on the top right of this form.

1. How long (in years) and under what circumstances have you known the applicant?

_____

_____

_____

2. Give your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison with other individuals whom you have known in similar circumstances.

	Top 5%	Top 15%	Top 30%	Top 50%	Lower 50%	Insufficient Knowledge
Analytical Skills	❑	❑	❑	❑	❑	❑
Collaborative Working Skills	❑	❑	❑	❑	❑	❑
Creativity	❑	❑	❑	❑	❑	❑
Independent Working Skills	❑	❑	❑	❑	❑	❑
Initiative and Motivation	❑	❑	❑	❑	❑	❑
Integrity	❑	❑	❑	❑	❑	❑
Intellectual Ability	❑	❑	❑	❑	❑	❑
Leadership Abilities	❑	❑	❑	❑	❑	❑
Maturity	❑	❑	❑	❑	❑	❑
Oral Communication Skills	❑	❑	❑	❑	❑	❑
Written Communication Skills	❑	❑	❑	❑	❑	❑

3. Using the space provided, please elaborate upon the ratings you have made above and offer any additional information that will be helpful to us in considering this applicant for admission to graduate school. Please comment on the applicant's strengths and limitations.

4. Please indicate your overall endorsement of the applicant:

- ❑ I strongly recommend the candidate for admission
- ❑ I recommend the candidate for admission
- ❑ I recommend the candidate for admission with some reservation
- ❑ I do not recommend the candidate for admission

Your name _____

Title or Position _____

Organization _____

Address _____

Phone Number _____ **Email** _____

Signature _____ **Date** _____

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