
Recommendation Form for MBA Program



Office of Graduate Studies

Directions for the Applicant:

The applicant should provide a self-addressed envelope to the recommender together with this form. The applicant should mail three letters of recommendation in their sealed envelopes at one time directly to Graduate Studies, Bloomsburg University, Bloomsburg, PA 17815.

PART A – TO BE COMPLETED BY APPLICANT

NAME (Print) Last First Middle Initial

I agree that the recommendation I am requesting shall be held in confidence by officials of Bloomsburg University, and I hereby waive any rights I may have to examine it. Yes No

SIGNATURE OF APPLICANT

DATE

ADDRESS OF STUDENT: Street City State Zip Phone Number

PART B – TO BE COMPLETED BY THE RECOMMENDER

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

Statement:

We would appreciate your assessment of the applicant's scholarship and professional promise. Please include in the statement an assessment of strengths and weaknesses. If additional space is needed, please feel free to use the other side. If you prefer, you may write the entire statement on your own stationary.

Please Complete Next Page



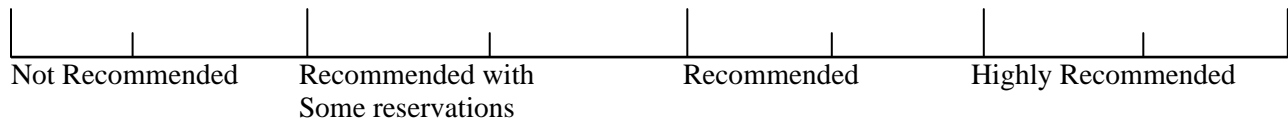
Office of Graduate Studies

PART C – TO BE COMPLETED BY THE RECOMMENDER – SUMMARY EVALUATION

Please indicate the applicant’s promise as a graduate student in comparison with others of similar age and experience.

	Below Average	Average	Above Average	Outstanding	Truly Exceptional			Inadequate Opportunity to Observe
	Lowest 40%	40-60%	61--85%	86-95%	Top 5%			
					Next 2%	Next 2%	Top 1%	
Intellectual potential								
Ability to work with others								
Maturity								
Communication skills: oral								
Communication skills: written								
Ability to analyze a problem and formulate a solution								
Motivation for proposed program of study								
Potential for career advancement								

Please indicate the strength of your overall endorsement by placing an “X” along the scale.



PART D – MAILING DIRECTIONS FOR THE RECOMMENDER

Please place your recommendation in an envelope, seal it, and sign your name over the seal. Please give the sealed envelope to the student to mail to Graduate Studies at Bloomsburg University, Bloomsburg, PA 17815.

SIGNATURE	PLEASE PRINT NAME	DATE
POSITION	WORK ORGANIZATION	
ADDRESS		PHONE NUMBER