

Graduate Admission Recommendation

Rutgers, The State University of New Jersey

Duplicate this form as needed for each recommender

Name of Applicant: _____
Last First Middle

Program Applied To: _____

To the applicant: Complete this portion of the form, then give it to your recommender with a stamped, self-addressed envelope.

Right to Access: This letter of recommendation is confidential. Such letters are not accessible to applicants for admission. However, Public Law 93-380, Educational Amendments Act of 1974, grants enrolled students the right to inspect letters of recommendation. If the applicant does not waive right to access and is admitted and enrolled, he or she will be able to access letters. Please check: waive do not waive my right to access this letter.

Signature of applicant

Date

To the recommender: Please return this form in a signed, sealed envelope to the applicant.

1. At what level would you place the applicant among the students you have known?

Top 5% _____ Top 10% _____ Top 15% _____ Top Quarter _____ Second Quarter _____ Bottom Half _____

2. Your letter will be most helpful in distinguishing this applicant from others if your remarks go beyond general endorsement to comment specifically on academic performance and potential for rigorous advanced degree work. Please focus on originality, motivation, written and verbal comprehension and expression, and judgment. Indicate how long and in what capacity you have known the applicant.

3. Is there any reason we should hesitate to admit this student? If so, please explain.

Signature _____ Date _____

Position _____ Address _____

Telephone Number _____

Business

E-Mail