FOR	OFFICE	LISE	ONLY

## **APPLICANT SECTION**

Please complete this section, then deliver or mail this form and self-addressed envelope to your reference provider. Ask him//her to return this completed form to you sealed in the envelope you provided with his/her signature across the seal. Do not open or break the seal. Submit the sealed recommendation letter in the same packet with all of your application materials.

Applicant Last/Family Name:Applicant First Name:	
Applicant Date of Birth: Email Address/Phone Number:	
Semester for which you are applying:   Fall of 20   Spring of 20   Summer of 20	
Department(s) of study:	
Degree(s) seeking:	
I understand that this recommendation will be used only for admission and fellowship decisions, and hereby waive my right of access to this recommendation.	lation.
Applicant Signature Date	
Recommendation letters are purged from each student's file upon enrollment. We recommend that you request a personal copy of your recommendation letter from writer if you wish to have one for your own records. CGU will not be able to provide a copy to you.	om the
RECOMMENDATION PROVIDER'S SECTION  The admission committee would appreciate your judicious evaluation of the applicant. Claremont Graduate University requires its applicants to sub application materials to the University in one self-managed packet. We ask that you please return this completed evaluation to the applicant direction sealed envelope. To preserve confidentiality of your recommendation, please affix your signature to the sealed flap of the recommendation envelope.	mit all <b>ly in a</b>
Note: By signing the waiver above, the applicant has waived his/her right to view this recommendation. The applicant may have access to this recommendation the admission process if he/she did not sign the waiver above. After enrollment, this recommendation will be purged from the student's file. We so you to retain a copy for your personal records.	
If you do not know the student well enough to give a recommendation, please check here $\Box$	
Your Name:Phone: ()	
Position/Title: Organization:	
Email Address:	
Mailing Address:	
Add address above line  How long have you known the applicant? In what capacity?	
Statement About the Applicant Please attach a letter to make important comments concerning this applicant. Please address the following:	
What is your estimate of the applicant's promise as a graduate student? What are the applicant's strengths, weaknesses, and potential for independency and research? Please include notations of accomplishments and motivations, intellectual independence, and ability to organize and exideas clearly in writing and oration. In your opinion, are there factors that may not be reflected on the applicant's scholastic or employment reincluding aspects of character and personality that bear on his/her ability to succeed in graduate studies and subsequent career or profession	xpress cords,
For Executive Management applicants, please comment on the applicant's: a) performance as a manager; b) prospects in the managemen field; c) intellectual ability and capacity for advanced graduate work, and d) the relevance of graduate work to his/her future.	t
I □ strongly recommend □ recommend □ recommend with reservations □ do not recommend this applicant for the degree program to which he/she is applying (see degree listed in the applicant section).	
I □ would □ would not be willing to respond to additional questions by telephone or email.	
Signed: Date:	