

Referee Recommendation Letter

Student Information

Full Name
Graduate Program Applied for:
Program coordinator contact (e-mail)
Referee Name
How long have you known this candidate?

Please rate this candidate based on the following criteria

Criterion	Outstanding	Very good	Good	Average	poor
	Top 5%	Top 10%	Top 25%	Top 50%	Below 50%
Intellectual Ability					
Motivation					
Character (Cooperation/Team work)					
Knowledge in chosen field					

Recommendation

Highly recommend

Recommend

Do not recommend

Please write a statement about the candidate (Attach additional sheet as necessary)

Referee Name	_Title
Organization	e-mail
Signature	Date

Please send this <u>CONFIDENTIAL</u> recommendation directly to the program coordinator listed above.