

Graduate Programs Recommendation Form

Section 1: Applicant Information

First Name:	Last Name:
UNT Student ID#: Leave Student ID blank if you have not received it	_ Email:
Master Program seeking admission: Major	\square MS \square MBA
Term/Year of Entry: □ Fall □ Spring □ Summ	ner (year)
students are given the right to inspect their record candor on the part of the individual completing the this recommendation form. If you wish to waive	n of the Family Education Rights and Privacy Act of 1974, ds, including letters of recommendation. In order to encourage his form, the student may choose to waive the right of access to the right to examine this recommendation form, and any w. If left unsigned, you will have access to the form upon
Applicant Signature:	Date:
Section 2: Recommender Information	
First Name:	Last Name:
Current Organization:	Current Position/Title
Address:	Phone Number:
Context of Relationship:	
How long have you known the applicant?	



to

Section 3: Recommendation

In this section, you will find 9 competencies. Please rate the applicant for each competency that corresponds to the behavior that you have seen the applicant most consistently exhibit.

		Superior/ Excellent 100-90%	Good 80-89%	Average 60-79%	Poor 0-59%	Unable to Judge		
Intellectual Ability								
Analytical Ability								
Creativity & Imagination								
Initiative								
Written Communication								
Oral Communication								
Professional Impression	& Poise							
Leadership Potential								
Collaboration with others								
Is there anything about yo		on which you would like		t?				
Overall, I	Recommend this applicant, with reservations							
	Recomme	end this applicant stically recommend this						
Recommender Signature:			Da	te:				

Please email or mail this completed form to:

 $\textbf{Email:} \ RCoBMasters@unt.edu$

Mailing Address:

G. Brint Ryan College of Business Graduate Programs Office, BLB 201 1155 Union Circle #311160 Denton, Texas 76203-5017

