

**GEORGIA SOUTHWESTERN STATE UNIVERSITY
RECOMMENDATION FOR GRADUATE STUDY**

**SCHOOL OF BUSINESS
GRADUATE ADMISSIONS
800 WHEATLEY STREET
AMERICUS, GA 31709**

To the Applicant: Complete the information in this section and then forward this form to the person who is recommending you for graduate study. Three recommendations are required to complete your application packet for Graduate Studies.

Name _____
Last First Middle Last name in previous enrollment

Address _____
Street Address/P. O. Box

City State Zip County

Email _____

Telephone Home _____ Work _____

Degree Sought: MBA Certificate

Proposed Major (See GSW Bulletin) _____

The Family Education Rights and Privacy Act of 1974 provides you access to any letters of recommendation written about you, but recommendations in confidence carry greater weight. Therefore, you may wish to consider waiving your right of access to this letter of recommendation.

I hereby waive do not waive my right of access to this letter of recommendation.

Applicant's Signature _____ Date _____

To the Person Completing the Recommendation: You are requested to complete this form and return it, in a sealed envelope with your signature across the flap, to the person who made the request. The applicant to Graduate Studies must submit an application packet complete with three recommendations to the School of Business at Georgia Southwestern State University. For your information, please note in the section above whether or not the applicant has waived access to this recommendation.

Name _____ Position _____

Employer _____ Address _____

How long have you known the applicant? _____ In what capacity? _____

Would you like to be contacted about this applicant? _____ Telephone _____

RATING FORM

Please rate the applicant on the following skills using the rating scale provided.

ATTRIBUTE	NO EVALUATION	UNSATISFACTORY	Minimally Satisfactory	Average	Above Average	Excellent
CRITICAL THINKING SKILLS						
CREATIVITY AND IMAGINATION						
COMMUNICATION SKILLS						
SELF-RELIANCE/INDEPENDENT THINKING						
MOTIVATION						
RESEARCH APTITUDE						
PROFESSIONAL KNOWLEDGE						
ABILITY TO WORK WITH OTHERS						

In addition to the specific ratings on this form, we invite you to submit additional comments or a letter addressing the applicant's scholarship, personality, character, and professional promise. Please include assessment of strengths and weaknesses in your comments (below) or in your letter.

ADDITIONAL COMMENTS:

SIGNATURE _____ **DATE** _____