

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

**SCHOOL OF COMPUTING & MATHEMATICS  
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: MS

Proposed Major, Area of Concentration/Certification (See GSW Bulletin)

Computer Science Computer Information Systems Certificate Program (Online)

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 Computer & Information Sciences 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
<b>CRITICAL THINKING SKILLS</b>						
<b>CREATIVITY AND IMAGINATION</b>						
<b>COMMUNICATION SKILLS</b>						
<b>SELF-RELIANCE/INDEPENDENT THINKING</b>						
<b>MOTIVATION</b>						
<b>RESEARCH APTITUDE</b>						
<b>PROFESSIONAL KNOWLEDGE</b>						
<b>ABILITY TO WORK WITH OTHERS</b>						

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** \_\_\_\_\_