

**Ph.D./M.S. Programs**  
**The Smeal College of Business Administration**  
**The Pennsylvania State University**

**CONFIDENTIAL RECOMMENDATION OF APPLICANT**

*To the Applicant:*

Please type or print your name \_\_\_\_\_  
Last First Middle

Current Address \_\_\_\_\_

For the convenience of the person completing this form, you should include a stamped envelope addressed to yourself. Return the sealed recommendation envelope to Penn State with your other application materials.

**WAIVER:**

Under the federal law entitled the Family Educational Rights and Privacy Act of 1974, students are given the right to inspect their records, including letters of recommendation. While we shall consider all letters of recommendation carefully, we believe that in many instances letters written in confidence are, in the long run, of greater utility in the assessment of a student's qualifications, abilities, and promise.

We invite you, therefore, but do not require you, to sign the following waiver.

1. I expressly waive any rights I might have to access to this letter of recommendation under the Family Educational Rights and Privacy Act of 1974, or any other law, regulation, or policy.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

*To Recommender:*

The person whose name appears above is applying for admission to a Penn State graduate program. In considering applicants, the admissions committee typically finds that a recommendation presenting a balanced view of an applicant's abilities and other attributes is most helpful. This form is provided for your convenience only. We would welcome your comments in whatever format you think suitable. It is recommended that you keep a copy for your files.

1. How long have you known the applicant? \_\_\_\_\_

2. In what capacity? \_\_\_\_\_

3. What do you consider to be his/her most outstanding characteristics or talents? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please rate the applicant on the scale below. What reference group are you using in these comparisons? \_\_\_\_\_

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	Top 5%	Top 15%	Top 1/3	Middle 1/3	Bottom 1/3	Unable to Judge
Intelligence	_____	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____	_____
Communication skills: oral	_____	_____	_____	_____	_____	_____
Communication skills: written	_____	_____	_____	_____	_____	_____
Ability to work well with others	_____	_____	_____	_____	_____	_____
Motivation and purposefulness	_____	_____	_____	_____	_____	_____
Leadership abilities	_____	_____	_____	_____	_____	_____
Imagination and creativity	_____	_____	_____	_____	_____	_____
Professional Ethics	_____	_____	_____	_____	_____	_____

5. The admissions committee would appreciate any additional statement you may wish to make concerning the Applicant's capacity for graduate work in business administration.

6. Please check one of the following boxes to indicate the degree of your overall evaluation for graduate study in business administration.

- strongly recommend
- recommend
- recommend with reservations
- do not recommend

7. \_\_\_\_\_  
your name (printed or typed)

\_\_\_\_\_  
title, grade, or rank and department

\_\_\_\_\_  
institution

\_\_\_\_\_  
address

\_\_\_\_\_  
signature

\_\_\_\_\_  
date