

South Carolina State University
COLLEGE OF GRADUATE & PROFESSIONAL STUDIES
Box 7098 – 300 College Street, NE – Orangeburg, SC 29117-0001

RECOMMENDATION FOR GRADUATE ADMISSION

Section I. Applicant. Please complete this section before giving this form and an addressed, stamped envelope to your recommender. Be sure that you have allowed at least 4 weeks prior to the application deadline and that your recommender is aware of this deadline. Please type or print in **BLACK INK**.

Name _____ SSN _____

Degree Sought _____ Proposed Subject-Matter Area _____

I do I do not waive my right to read this confidential recommendation.

Applicant's Signature **Date**

Section II. Recommender. Because of federal legislation giving students access to educational records, South Carolina State University cannot assure the confidentiality of your statement unless the applicant has waived his/her right as noted above. Your willingness to serve as a reference is appreciated.

A. Please provide your candid assessment of the applicant's potential to pursue full-time graduate study and research in the subject-mattered specified, continuing your remarks on the reverse side or another sheet, if needed.

B. How long have you known the applicant? _____ In what relationship? _____

C. Please rank the applicant by placing an "X" in the appropriate spaces:

	Top 5%	Top 10%	Top 25%	Bottom 50%	Unable to Rate
Preparation in chosen area					
Receptivity to new ideas					
Ability to think creatively					
Ability to work well with others					
Written communication skills					
Oral communication skills					
Ability to work independently					
Demonstrated research skills					

I recommend the Applicant:

_____ With Enthusiasm

_____ Without Reservations

_____ With Reservations

Signature _____ Date: _____

Printed Name _____ Title _____

Employer _____

Address _____

If an addressed envelope has not been provided, please mail to **Graduate Admissions** at the above address. Thank you.