

## Recommendation form for admission to the R. L. Bolin Graduate School within the Kimbell School of Geosciences

The applicant should complete the first page of this form and send it as an e-mail attachment to each referee. The completed form and/or recommendation letter should then be emailed by the referee to: **Leah Hickman**, Director, Processing and Operations, Admissions, leah.hickman@msutexas.edu. Or mail to:

Leah Hickman, Director, Processing and Operations, Admissions Midwestern State University 3410 Taft Blvd Wichita Falls TX 76308

Applicants should complete below prior to completion of the form by the recommender.

\_\_\_\_\_\_ is applying for admission to the M.S. program in the Kimbell School of Geoscience, Midwestern State University.

**Applicant's Statement**: I am aware that under the Congressional Family Educational Rights and Privacy Act of 1974 (Sec. 438 (a) (20) (B) C (c), I am not required to, but that I may voluntarily waive my right to access confidential letters and statements of recommendation submitted to Midwestern State University in support of my application to the Graduate School. I further understand that under the provision of the Family Educational Rights and Privacy Act, an unsuccessful applicant, regardless of whether such applicant has signed a waiver, has no right to inspect any of the admission application materials accumulated in their submission package.

I hereby: do lo not lo waive my right of access to any and all letters or statements in this recommendation, which may be submitted by \_\_\_\_\_\_.

(referee name)

Signature of Applicant	Date	

(if electronically submitted, either your electronic signature or typed name will be accepted)

Approved by the Southern Association of Colleges and Schools Commission on Colleges, 1866 Southern Lane, Decatur, GA 30033 form v.12/20

**To the referee:** Thank you for agreeing to serve as a reference for this candidate for admission. If you would rather write a letter, either in addition to or in place of this form, please include it as an additional attachment.

RELATIONSHIP TO APPLICANT			
1.) How long have you known the applicant?	years		months
2.) How well do you know applicant? casually 🖵	well 🖵	very well	
3.) What is/was the nature of your relationship with	the applica	int?	
Teacher in one class 📮 🛛 Teacher in multiple classes	: 🖵 🛛 Emple	oyer 🗅	Research Advisor 🖵
Major Advisor 🖵 🛛 Other (please specify) 🖵			

## RELATIVE RATING OF THE APPLICANT

4.) Please rate the applicant in the areas indicated below by comparing him or her to a reference group Please describe the reference group below:

5.) Compared to the reference group, the overall ability of the applicant is:							
Lowest 25% 🗆	🕽 Middle 50% 🖵	Upper 25% 🖵	Upper 10% 🖵	Upper 5% 🖵			
Upper 1% 🖵	Inadequate opport	tunity to observe	e 🗖				

6.) Applicant's potential as a graduate student (please rate by one of the indicated numeric values) as compared to the reference group.

	Outsta	tanding Above Average		Average		Below Average		Poor		No		
	10	9	8	7	6	5	4	3	2	1	0	Information
Intellectual												
Ability												
Motivation												
Writing												
Expression												
Oral												
Expression												
Analytical												
Ability												
Maturity and												
working with												
others												

7.) In your opinion, is the applicant's academic record representative of their scholastic ability? Yes D No D On't Know D

8.) Do you have any information relating to emotional intelligence, temperament, or "people skills" that should be taken into account in admitting and/or planning the student's graduate studies?

9.) Use the space below to share any information you feel may be pertinent regarding the applicant's ability to pursue a graduate degree (*e.g.*, ability to organize and express ideas clearly, orally and in writing, other experience).

10.) I would give this student the following recommendation:							
highest possible 🖵	strong 🖵	average 🖵	no recommendation $\Box$				
recommendation w	ith reservat	ion 🖵					

Signature of respondent:	Date:
(if electronically submitted, either your electronic signature or typed name will be	accepted)
Printed Name	

Title

Address