

**Immaculate Conception Seminary
School of Theology
GRADUATE ADMISSION RECOMMENDATION**

Applicant _____ SS# _____
LAST FIRST MI

Graduate Degree or Program Sought _____

**RECOMMENDATIONS FROM THOSE FAMILIAR WITH YOUR ACADEMIC
AND PROFESSIONAL QUALIFICATIONS ARE PREFERRED.
RECOMMENDATIONS FROM PERSONAL FRIENDS AND FAMILY MEMBERS ARE NOT ACCEPTABLE.**

To the Applicant:

Complete the top portion of this form and give it to the person making the recommendation. Include the RECOMMENDATION ENVELOPE from your application package. Address the envelope to yourself, but to retain confidentiality, do not break the seal when it is returned.

Right to Access:

This letter of recommendation is confidential. Such letters are not accessible to applicants for admission. However, Public Law 93-380, Educational Amendments Act of 1974, grants enrolled students the right to inspect letters of recommendation. If the applicant does not waive the right to access and is admitted and enrolled, he or she will be able to access these letters.

Please check one: I () do, () do not waive right to access this letter.

SIGNATURE OF APPLICANT DATE

To the Recommender:

Please complete the rating scale in this section of the form. To mail, use the RECOMMENDATION ENVELOPE provided by the applicant. Be sure to seal and sign the back of the envelope.

1) Attribute	No Basis for Evaluation	Very Poor	Below Average	Average	Above Average	Outstanding
a. Character and personal integrity						
b. Emotional balance and maturity						
c. Ability to communicate						
d. Scholastic ability						
e. Ability to work with professional associates						
f. Motivation and initiative						
g. Demonstration or promise of professional growth						
h. Demonstration or promise of professional leadership						
i. Success in working with children/youth/adults						
j. Overall potential for graduate study						

(continued on reverse)

2) Please use the space below (or your own letterhead) to provide additional information and/or comments about this applicant.

Your comments will distinguish this applicant from others if your remarks go beyond a general endorsement. Please comment, if possible, upon potential for advanced degree work, originality, motivation, written and verbal expression, comprehension and judgment. Please comment also on the applicant's ability to interact and relate effectively with peers, supervisors and customers. Indicate how long and in what capacity you have known this applicant. Thank you for your help with this important professional decision.

Signature _____ Date _____

Name _____ Position _____

Address _____

_____ Phone () _____