



Graduate Admission Letter of Recommendation

TO BE COMPLETED BY THE APPLICANT

Fill in the information below and then give or email this form to your recommender (a professor or, if appropriate, to a professional in the field). This person should be familiar with your academic and / or professional background and be able to evaluate your ability to undertake study at the graduate level. Please provide each recommender with a recommendation envelope in addition to this form.

Name of Applicant _____
Social Security Number _____
Degree and Program to which you are applying _____

I hereby waive my right of access, under the Family Education Rights and Privacy Act of 1974, to this letter or recommendation in connection with my application for graduate admission to Hunter College.

Signature of Applicant

Date

Note that signing this statement is optional. Under law, refusal to sign the statement cannot be used against you in the admission process.

TO BE COMPLETED BY THE RECOMMENDER

Basis for Judgment

How long have you known the applicant? Months _____ Years _____

In what capacity have you known the applicant? (Please check one)

Employer Supervisor Professor Colleague Other (please specify) _____

How well do you know the applicant? (Please check one)

Very well Moderately well Not very well

Rating

What is the applicant's promise for Graduate Study? (Please check one)

Excellent Good Fair Poor

What is the applicant's promise for success in their chosen field? (Please check one)

Excellent Good Fair Poor

How do the applicant's personal qualities support academic and professional success? (Please check one)

Excellent Good Fair Poor

Please provide an overall recommendation for the applicant. (Please check one)

Recommend strongly Recommend Recommend with reservation Do not recommend

Recommendation

Please write a brief statement evaluating the applicant (if additional space is required, use the reverse side of this form). Consider the following questions:

- What are the applicant’s unique abilities, strengths and limitations? How do these relate to the applicant’s academic or professional goals?
- What special personal qualities, capacities and interests does the applicant have which may distinguish him or her from others? How do these relate to the applicant’s academic or professional goals?
- How does the applicant compare with outstanding contemporaries?
- What is the applicant’s potential ability to apply knowledge and skills to professional practice?

If you are recommending an applicant to the School of Social Work, please also evaluate the functioning of the applicant in social, professional and supervisory relationships. Criteria for admission include the capacity to meet the intellectual and emotional demands of graduate professional education, develop professional self-awareness and self-evaluation and maintain professionally helpful relationships. Professional performance in social work requires an intellectual ability to engage in abstract reasoning, think conceptually and analytically, formulate mature judgments and be clear in self-expression, both in writing and verbally.

Signature

Signature of Recommender _____ Date _____

Name of Recommender _____

Title _____

Organization _____

Address _____

Number and Street

City

State

Zipcode