

MBA Letter of Recommendation

(Please type or print in black ink.)

TO BE COMPLETED BY APPLICANT

Applicant's Name _____

The Family Education Rights and Privacy Act of 1974 and its amendments guarantee students access to educational records concerning them. Students are also permitted to waive their right of access to recommendations. Some recommenders may prefer that their letters not be made available to the student.

The following signed statement indicates the wish of the applicant regarding this recommendation.

____ I waive ____ I do not waive
my right to inspect the contents of the following recommendation.

Signature of Applicant _____ Date _____

TO BE COMPLETED BY RECOMMENDER

Note: Please answer the following questions and make a detailed and candid statement to assist us in judging the applicant's academic capabilities, initiative, and maturity as these traits indicate a potential for a management career. After completing this form please place it in a sealed envelope, sign the back of the envelope across the seal, and return it to the student. If you prefer, you may return it directly to Graduate Admissions Committee, School of Business & Economics, Indiana University Northwest, 3400 Broadway, Gary, IN 46408. Your assistance to the Graduate Admissions Committee is sincerely appreciated.

How well and in what capacity have you known the applicant?

What do you consider to be the applicant's outstanding talents or strengths?

What do you consider to be the applicant's primary areas for improvement relevant to graduate study and a professional career?

Please make any additional comments about the applicant's capabilities and potential for a management career, which would help the Admissions Committee, make its decision.

In comparison with other prospective graduate students you have known, how does this applicant rank?

	Outstanding Top 2%	Outstanding Top 10%	Strong Top 1/3	Average Middle 1/3	Weak Bottom 1/3	Insufficient Information
Leadership ability						
Intellectual capacity						
Verbal skills						
Written skills						
Analytical skills						
Ability to work with others						
Maturity						

I strongly recommend recommend recommend with reservations do not recommend, that this applicant be admitted to the Graduate School of Business.

I understand the applicant may have access to this information unless the waiver statement on the front of this form indicates otherwise.

Signature _____ Date _____

Name _____

Position or title _____

Company Name _____

Company Address _____

_____ Telephone () _____ - _____

Your evaluation will become part of this applicant's formal application. Your prompt response in returning this form is essential to a timely decision. Thank you for your cooperation!