### RECOMMENDATION FORM

To be completed by applicant:

<table>
<thead>
<tr>
<th>Name</th>
<th>RMU No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last</td>
<td>First</td>
</tr>
</tbody>
</table>

Please list the master’s degree program to which you are applying to: ___________________________________________

I agree that the recommendation I am requesting shall be held in confidence by officials at Robert Morris University and I hereby waive any rights to examine it. □ Yes □ No

**Applicant’s Signature**

**Date**

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To be completed by person providing recommendation:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
</tr>
</thead>
</table>

1. How long and in what capacity have you known the applicant?

   __________________________________________

2. Are you aware of the applicant’s academic record? □ Yes □ No

3. Do you feel that the applicant is prepared for the rigorous challenges of a graduate degree program? *(Please explain)*

   __________________________________________

4. Please rate the applicant in the following areas using the following scale:

   1) Excellent  2) Good  3) Average  4) Poor  5) Unable to judge

   _____ Written communication skills  _____ Oral communication skills
   _____ Quantitative skills  _____ Problem-solving skills
   _____ Decision-making skills  _____ Ability to work with others

5. Summary evaluation. Please indicate your overall recommendation for this applicant:

   □ Highly recommend  □ Recommend  □ Recommend with reservation  □ Do not recommend

6. □ Please check here if you have chosen to add additional comments on the back of this form.

**Signature**

**Date**

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**RETURN THIS FORM TO THE APPLICANT IN A SEALED ENVELOPE WITH YOUR SIGNATURE ACROSS THE FLAP.**
The applicant must submit it unopened to the Graduate Admissions Office for review with their application.