Minot State University

Master of Science in Management
Professional Recommendation Form
(Immediate or above supervisor – preferably
recent or present if available)

Applicant's Section
Please fill in your name and then give or mail this to your recommender to complete.
Last (family) name:————————————————— First (given) name: —————————————————

Family Education Rights Privacy Act (FERPA) (Buckley Amendment)
Under the provision of this act you have the right, if you enroll at Minot State University, to review your educational records. The act further provides that you may waive your right to see recommendations for admission. I hereby waive the right to see this recommendation form. I authorize the recommender to complete this form and to share it with Minot State University. I waive any legal right to sue based on the contents of this form.

Student's signature:————————————————— Date: —————————————————

Recommender's Section

Name: —————————————————————————————————————
Title: ————————————————————————— Telephone:———————————
Organization:————————————————————————————————————
Address Line 1:—————————————————————————————————————
Address Line 2:—————————————————————————————————————
City:—————————————————————————— State:————— Zip Code:—————————

Please apply the rating scale listed below to evaluate the student's ability to function in a graduate program based on the items A through X:

1. Low, would not function at a graduate level.
2. Below average, doubtful graduate ability.
3. Average, may be able to function at a graduate level, but may need special help.
4. Above average abilities, could function at a graduate level if he/she applied himself/herself appropriately.
5. Excellent, no question as to ability.
6. Not applicable if you do not have information to make a judgment.

Criteria Items
Please circle the most appropriate (**only one**) utilizing the above scale for each criteria.

	Low		**Average**		**Excellent**	**NA**
A. Critical thinking (ability to comprehend and make logical deductions from written and oral materials)	1	2	3	4	5	6
B. Reading ability	1	2	3	4	5	6
C. Language usage – oral	1	2	3	4	5	6
D. Language usage – written	1	2	3	4	5	6
E. Research skills	1	2	3	4	5	6
F. Interpersonal skills	1	2	3	4	5	6
G. Ability to benefit from criticism	1	2	3	4	5	6
H. Knowledge and application of clinical skills	1	2	3	4	5	6
I. Dependability	1	2	3	4	5	6

Attachment F

		Low		Average			Excellent	NA
J.	Academic achievement	1	2	3	4		5	6
K.	Computer competence	1	2	3	4		5	6
L.	Motivation and initiative	1	2	3	4		5	6
M.	Maturity and stability	1	2	3	4		5	6
N.	Ability to work independently	1	2	3	4		5	6
O.	Ability to work in a group	1	2	3	4		5	6
P.	Ability to lead a group	1	2	3	4		5	6
Q.	Potential for senior level positions	1	2	3	4		5	6
R.	Professional integrity	1	2	3	4		5	6
S.	Professional commitment	1	2	3	4		5	6
T.	Ability to analyze and solve problems	1	2	3	4		5	6
U.	Oral communications	1	2	3	4		5	6
V.	Written communications	1	2	3	4		5	6
W.	Learns from experience	1	2	3	4		5	6
X.	Innovation	1	2	3	4		5	6

How long have you known this applicant and in what capacity (e.g., faculty, advising, academic administration)?

Please describe the particular strengths and weaknesses of this applicant. Also describe any special talents or experience. If you cannot find anything to say, please give the applicant's strongest trait and weakest trait.

If you have worked with or supervised this applicant on a project, please describe the project and give an evaluation of the applicant's performance.

CHECK ONLY ONE

☐ Recommend without reservation   ☐ Recommend with reservation (explain reservations)   ☐ I do not recommend

Reference's Signature _____ Date _____

Position / Title _____ Institution _____

Address _____ Contact Phone # _____

MINOT STATE UNIVERSITY

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