

LETTER OF RECOMMENDATION

THE GRADUATE SCHOOL
TENNESSEE TECHNOLOGICAL UNIVERSITY
COOKEVILLE, TENNESSEE 38505

Applicant: Please PRINT or TYPE your name and degree intent and supply the recommender with a stamped envelope addressed to the Graduate School, P.O. Box 5036, Tennessee Technological University, Cookeville, TN 38505

Applicant's Name _____ Student ID Number _____
Last or Family Name First Middle or Maiden

Degree Sought: _____ Major: _____

Recommender:

Please give your opinion of the above listed applicant's ability to successfully complete a program of graduate study at Tennessee Technological University. This form should not be returned to the applicant, but should be mailed directly to the Graduate School.

How many years have you known the applicant? _____ In what capacity? _____

Please indicate in the scale at the right your opinion of the following characteristics of the applicant:

- Scholarship – as reflected in the quality of work
- Intelligence – as distinguished from acquired abilities
- Integrity and Dependability – personal and professional
- Human Relations – cooperation with others in working relationships
- Emotional Stability-- stable, self controlled
- Leadership—initiative, aggressiveness

Superior	Above Average	Average	Below Average	Inferior	Unknown

Please provide an additional assessment of the applicant's potential for success in graduate school. Include any particular strengths and/or weaknesses. We will appreciate your candid appraisal. Use back of form if necessary.

Recommendation for Admission
(check one)

Highly Recommended
Recommended with reservations

Positively Recommended
Not Recommended

Signed _____ Position or Title _____

_____ Date _____
(Please print or type name of recommender)

Address _____