



# General Recommendation Form for Graduate Admission

## The Graduate School

1500 North Patterson Street  
 Valdosta, Georgia 31698  
 Phone: 229.333.5694 ♦ Toll-free: 800.618.1878 option 5 ♦ Fax: 229.245.3853  
 www.valdosta.edu/gradschool ♦ gradschool@valdosta.edu

**Letters of recommendation may be submitted as attached documents; however, letters of recommendation received without the completed form will not fulfill the recommendation requirements for admission review. Read all instructions carefully. This form is required for the following programs:**

Doctor of Education (Ed.D.)	Master of Education (M.Ed.) in School Counseling	Counseling)
Doctor of Public Administration (D.P.A.)	Master of Library & Information Science (M.L.I.S.)	Master of Science (M.S.) in Psychology (Industrial/Organizational)
Education Specialist (Ed.S.) in Teaching & Learning (on-campus and GOML track)	Master of Music Education (M.M. Ed.)	Master of Science (M.S.) in Sociology
Education Specialist (Ed.S.) in School Counseling	Master of Music Performance (M.M.P)	
Education Specialist (Ed.S.) in School Psychology	Master of Public Administration (M.P.A)	
Master of Arts (M.A.) in Communication Arts	Master of Science (M.S.) in Biology	
Master of Arts (M.A.) in English	Master of Science (M.S.) in Criminal Justice	
Master of Arts (M.A.) in History	Master of Science in Nursing (M.S.N.)	
	Master of Science (M.S.) in Psychology (Clinical	

### INSTRUCTIONS:

**Applicant:** Complete Part A (box below). Include your signature and submit the form to your recommender. Be sure to include a stamped, self-addressed envelope for your recommender to use for submission.

**Recommender:** Complete Parts B and C of this form. Please return this recommendation form with letter attached, in an envelope signed across the seal. Sealed recommendations may be sent to the applicant for mailing with other application materials or directly to the VSU Graduate School:

The Graduate School, Valdosta State University, 1500 North Patterson Street, Valdosta, GA 31698-0005.

### PART A: TO BE COMPLETED AND SIGNED BY THE APPLICANT

Please type or print clearly:

LAST NAME	FIRST NAME	MIDDLE NAME	OTHER NAMES	
STREET ADDRESS		APT/SUITE	CITY	STATE ZIP CODE
VSU STUDENT ID NUMBER OR LAST 6 DIGITS OF SOCIAL SECURITY NUMBER		DATE OF BIRTH	PHONE NUMBER	
TERM APPLYING FOR: _____ SEMESTER/YEAR (e.g., Fall/2010)		DEGREE/MAJOR SOUGHT: _____ DEGREE-MAJOR (e.g., MPA or MS in Criminal Justice)		

**Public Law 93-380, Family Education Rights and Privacy Act of 1974, grants students the right to have access to recommendations in their placement files, unless the right to such access has been waived by the statement below. Recommendation letters received by the Graduate School without the signature of the applicant will be considered as confidential and access waived.**

I hereby  Waive  Do not waive my right to see this recommendation.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**PART B: SUMMARY EVALUATION—TO BE COMPLETED BY RECOMMENDER**

Based on your knowledge of the applicant, please rate the applicant’s promise as a graduate student (in comparison to his or her peers) on the following criteria:

	Below Average	Average	Above Average	Top 10%	Inadequate Opportunity to Observe
<b>Research Aptitude</b>					
<b>Intellectual Ability</b>					
<b>Ability to work with others</b>					
<b>Creativity and imagination</b>					
<b>Maturity</b>					
<b>Self-confidence</b>					
<b>Communication skills - Oral</b>					
<b>Communication skills - Written</b>					
<b>Analytic Ability</b>					
<b>Motivation</b>					
<b>Potential in Career Field</b>					

Please indicate the strength of your overall endorsement of the applicant for graduate work:

- Highly Recommend                     
  Recommend                                     
  Recommend with Some Reservations  
 Do not recommend                     
  Unable to Observe

Relationship to applicant (e.g., instructor, professor, supervisor): \_\_\_\_\_

How many years have you known the applicant? \_\_\_\_\_

NAME (Please type or print for processing accuracy)

EMPLOYER

TITLE

ADDRESS

SIGNATURE

**PART C: WRITTEN ASSESSMENT—TO BE COMPLETED BY RECOMMENDER**

In addition to the specific ratings above, please attach a written assessment of the applicant’s scholarship, personality, character, and professional promise. Please include an assessment of strengths and weaknesses.

Submit completed form and attached letter to:  
 The Graduate School  
 Valdosta State University  
 1500 N. Patterson Street  
 Valdosta, GA 31698-0005