University of Missouri-Kansas City
Henry W. Bloch School of Management

GRADUATE ASSISTANTSHIP RECOMMENDATION FORM

Applicant's Name _____

To the Applicant: This form should be given to a reference that is able to comment on your qualifications for a graduate assistantship position. It should not be completed by a Bloch School faculty member, but by an individual with or for whom you have completed work that can comment on your ability and skills. You are responsible for ensuring the letter is completed and submitted to the department to which you are applying.

Under the Federal Family Educational Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation. However, those writing recommendations and those assessing recommendations may attach more significance to them if it is known that the recommendations will remain confidential. It is your option to waive your right to access these recommendations. Please mark your choice of option below and sign your name.

_____I waive my right to review this recommendation.

_____I do not waive my right to review this recommendation.

Applicant's Signature:_____ **Date**:_____

RECOMMENDATION

Reference Name (print):_____

Title:_____ **Institution**:_____

1. For how long have you know the applicant? _____

2. Do you know the applicant: _____Slightly _____Fairly Well _____Very Well

3. How are you affiliated with the applicant? _____

4. Please rate the applicant on the following characteristics from low (1) to superior (5).

Communication Skills	_____1	_____2	_____3	_____4	_____5
Leadership Ability	_____1	_____2	_____3	_____4	_____5
Initiative	_____1	_____2	_____3	_____4	_____5
Maturity	_____1	_____2	_____3	_____4	_____5
Dependability	_____1	_____2	_____3	_____4	_____5

5. Indicate the strength of your overall endorsement of the applicant:

   _____Recommend with reservation _____Recommend _____Highly Recommend

6. Feel free to elaborate using the reverse side of this form or a separate attachment on the above information or include any information that you believe is pertinent to the selection of this applicant as a graduate teaching/research assistant.

Signature of Reference:_____ Date:_____