

## Recommendation Form

**Please print or type**

*An online version of this form is available at: [www.mnstate.edu/gradpsyc](http://www.mnstate.edu/gradpsyc)*

**Applicant's name** (please print): \_\_\_\_\_

**To the Applicant:** Have this form completed by a professor (or a supervisor under whom you have worked) who is able to comment on your qualifications for graduate study.

**To the Recommender:** This person is applying for the Master's and post-Master's Specialist degree program in School Psychology. We would appreciate your honest appraisal of the applicant. You may attach a letter if you do not wish to be limited by the form. ***If you do not attach a letter, please provide written comments on page 2.***

**The application deadline for admission is February 15.** Please return this form prior to that date unless the applicant is filing a late application.

**Please be advised that under the Minnesota Government Data Practices Act  
 all references are available to the applicant upon request.**

Please rate the applicant in comparison to others with approximately the same amount of experience and education:

	Below Ave. < 50%	Average 50-75%	Very Good 76-90%	Excellent 91-100%	Not able to judge
Organizational skills					
Critical thinking skills					
Interpersonal skills					
Verbal communication skills					
Written communication skills					
Listening skills					
Motivation to succeed					
Emotional stability and maturity					
Independence and initiative					
Responsibility					
Adaptability and flexibility					
Ability to work with multicultural groups					
Collaborative skills					
Ethics/Integrity					
Ability to conduct an independent research project					

**Academic Potential:** Estimate the applicant's **academic** potential for completion of the Master's degree and the post-Master's Specialist degree on a scale of 1 (poorest) to 7 (best). \_\_\_\_\_

**Interpersonal Potential:** Estimate the applicant's **ability to work effectively** within the educational system and with diverse colleagues, students, and families on a scale of 1 (poorest) to 7 (best). \_\_\_\_\_

(please go to page 2)

## *Evaluation of Applicant*

We would appreciate your comments on the applicant's suitability as a graduate student and future school psychologist. Include how you know the applicant and for how long. We are interested not only in your impressions of the applicant's academic skills, but also your impressions of this person's interpersonal skills.

Do not include information that might indicate the individual's race, color, national origin, citizenship status, religion, creed, age, gender (unless by the individual's name it is obvious), sexual orientation, marital status, or status with regard to public assistance. In compliance with Section 504 of the Rehabilitation Act of 1973, please do not address any disability that this candidate may have.

You may either make your comments here or attach a separate letter.

Signature of Recommender: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Recommender (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Institution/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

**Please return this form to:**

Graduate Studies Office, Minnesota State University Moorhead, 1104 7<sup>th</sup> Ave. South, Moorhead, MN 56563