

# Applicant Recommendation

(TWO RECOMMENDATIONS REQUIRED; PLEASE COPY THIS FORM).  
RETURN FORM IN SEALED ENVELOPE TO THE ADDRESS BELOW.

## To be completed by applicant. Please print or type.

Term you wish to enroll:  Fall  Spring  1st Summer Session  2nd Summer Session Year: \_\_\_\_\_

Name \_\_\_\_\_  
LAST NAME
FIRST NAME
MIDDLE NAME

Maiden Name, if applicable \_\_\_\_\_ Social Security no. \_\_\_\_\_

I agree that the recommendation I am requesting shall be held in confidence by officials of Furman University and I hereby waive any rights I may have to examine it.  Yes  No

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## To be completed by person offering recommendation.

How long and in what connection have you known the applicant? \_\_\_\_\_

Please rate the applicant for graduate study in education based on the following:

	High 1 <small>(top 10%)</small>	Above Average 2 <small>(top 25%)</small>	Average 3 <small>(middle 50%)</small>	Low 4 <small>(bottom 25%)</small>	No Basis for Judgment
Performance as a teacher					
Professional attitude					
Perseverance toward goals					
Interest in professional growth					
Ability to work with others					
Ability to think logically and analytically					
Enthusiasm for learning and teaching					
Originality and intellectual curiosity					
Maturity (poise, self-control, flexibility)					
Judgment and common sense					
Integrity					
Written expression					
Oral expression					
Skill in use of educational technology					
Leadership potential					

(GS1)  Recommended highly  Recommended  Recommended with reservation  Not recommended (See back)



