

Reference for Graduate School

Name of Applicant: _____
Please Print (Last or Family Name) (First) (Middle)

Proposed Field of Study: _____

To Applicant:

WAIVER OF RIGHTS UNDER THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974. I hereby waive my rights to inspect and revise and to have access to this Reference Form when completed, provided that the information on this Reference Form is used solely in connection with my application to Graduate School at Montana Tech of The University of Montana.

Applicant's Signature: _____ Date: _____

NOTE: *At least two of the persons asked to complete this form should be persons who are qualified to assess your potential for graduate study. Examples are professors in your major field, technical supervisors, department deans or deans from your baccalaureate institution. References from relatives are not acceptable.*

To the individual completing this form:

Thank you for your time in providing this reference. The person whose name appears above is applying for Graduate School at Montana Tech and has listed you as a reference. The college will appreciate a frank appraisal of the applicant. Please complete the following form (in English) at your earliest opportunity. Failure to return this form may adversely affect the applicant's admission.

This form must be received directly from you or in a sealed envelope with your signature over the seal. Referral information will be kept strictly confidential if the applicant has signed the above waiver. If the waiver has not been signed, the applicant has a right to request access to this reference. Please attach additional pages if necessary.

Name of Person Providing Reference: (Please Print) _____

1. How long, how well, and under what conditions have you known the applicant? (If you do not know the student well, please state.): _____

2. Was the applicant ever in a class you taught? Yes No

3. Please provide us with your overall assessment of the applicant and his/her potential for success in Graduate School: _____

4. Do you know of any problems related to responsibility, qualifications, or performance, which should be considered? _____

5. Please check the appropriate box to indicate your assessment of the applicant with regard to the following qualities. Strike out any question you judge to be not applicable or which you cannot fairly answer.

		Poor	Below Average	Average	Good	Excellent
A.	Oral Expression of Ideas and Views	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Grasp of Basic Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Grasp of Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Suitability for Experimental Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Intellectual Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Suitability for Theoretical Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G.	English Writing Abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H.	Capacity for Analytical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I.	Initiative, Drive, and Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Where would you rank applicant among others you have known who have gone on to graduate studies in comparable fields in recent years?

- Upper 10% Upper 25% Upper 50% Lower 50%

7. A graduate advisor may wish to call for a discussion of the applicant's qualifications. Please indicate the two most convenient times during the day to call: 1. _____ 2. _____

8. Please check one:

- I would **STRONGLY RECOMMEND** this applicant for Admission to Graduate School.
 I would **RECOMMEND** this applicant for Admission to Graduate School.
 I would **RECOMMEND WITH RESERVATION** this applicant for Admission to Graduate School.
 I **DO NOT RECOMMEND** this applicant for Admission to Graduate School.

Signature: _____

Title: _____

Address: _____

Day Telephone: () _____ E-mail Address: _____

Date: _____

Please send this form to the following address as soon as possible:

**Graduate School
 Montana Tech
 1300 West Park Street
 Butte, MT 59701-8997**

*If mailing from a foreign country, please send **VIA AIRMAIL**.*