



TO THE APPLICANT:

Please complete the section below and ask your recommender to return this form and the letter of recommendation to you.

Name _____
(first) (middle initial) (last or family name)

Degree and academic program for which you are applying (if available) _____

American University student number (if available) _____

Under the Family Education Rights and Privacy Act of 1974, you have the right to review your official university student records. You may waive that right, specifically for this recommendation, by signing here. Your waiver will in no way affect your admission to the university.

(signature of applicant) (date)

TO THE RECOMMENDER:

Please write a letter of recommendation on a separate sheet and attach it to this form. Please include the student's name and AU student number (if available) on the letter. In your letter of reference, please assess the applicant's potential as a graduate student. You should consider previous accomplishments, intellectual independence, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly, and drive and motivation. Please explain in what capacity you have known the applicant and for what time period. This form should be returned to the applicant with your letter of reference on official letterhead in a signed and sealed envelope. The applicant will return the signed and sealed envelope with his or her completed application to Graduate Admissions.

Please rate the applicant in the following areas:

	Outstanding	Excellent	Good	Fair	Poor	Unable to judge
Academic performance						
Motivation for proposed program of study						
Intellectual capacity <i>(including reasoning and analytical ability, imagination, learning potential)</i>						
Research and writing ability						

(signature of recommender) (date)

(print name) (name of institution or organization)