



LETTER OF RECOMMENDATION FORM

University of West Georgia • Carrollton, Georgia 30118-4160

Under the provisions of the Family Educational Rights and Privacy Act of 1974 (Public Law 93-380), you may decide whether letters of reference written at your request are to be held confidential or whether they are to be available for your personal inspection. Check one of the following statements and place your signature in the space provided so that the reference will be advised of your choice.

_____ Confidential File. I grant permission for this letter of recommendation to be held confidential by the University of West Georgia.

_____ Open File. I retain the choice of having letters of reference available to me.

Signature of Applicant / Date

SSN or UWG ID _____ / _____ / _____ Name of Applicant _____

Degree Sought: [] MA [] MMUS [] MS [] MAT [] MSN [] MSRP [] MPA [] MPACC [] MBA [] MEd [] EdS
[] Initial Certification - French / Spanish [] Post Graduate Certification (e.g., Media, Prof. School Counseling, etc.)

Major/Area of Concentration or Area of Certification _____ (See Graduate Catalog for particular major)

INSTRUCTIONS TO RECOMMENDER: If you prefer writing a letter either in place of or in addition to this form, please feel free to do so. The letter should be written on official school or business letterhead stationery.

1. How well and in what relationship have you known the applicant? _____

2. When compared with other persons you have taught or known, how well is the applicant prepared for pursuing a graduate degree at the University of West Georgia?

_____ Highest 5% _____ Next Highest 20% _____ Next Highest 10% _____ Mid 20% _____ Lowest 40%

3. How would you rank the applicant's potential for success as a graduate student at the University of West Georgia?

_____ Master's or EdS easily _____ About 50% - 50% chance of Master's or EdS
_____ Good probability of Master's or EdS _____ Not graduate school material

4. Briefly describe the applicant's strengths and weaknesses: _____

Signature _____ Date _____ Title _____

Name (Printed or Typed) _____ Email/Phone Number _____

Employer _____ Address _____