Colorado
University of Colorado at Boulder

Request for Recommendation

Most programs require four letters of recommendation. Check with your program to confirm the required number of recommendations. You must make additional copies of this form yourself.

I. **To the applicant:** Complete Section I. One form should be given to each recommender.

_____ is applying for
Last (Family) Name First Name Middle Maiden Name (optional)

admission to a Graduate School of the University of Colorado and has listed you as a reference on his or her application for graduate work in the

_____
Department or School (to be filled in by applicant) Birth Date

Under the Family Educational Rights and Privacy Act of 1974, students who are admitted and who matriculate into the program to which they apply are given the right to inspect their records, including their letters of recommendation, unless they have waived their right of review.

You have the option of (1) signing the following waiver or (2) declining to do so.

☐ 1. I expressly waive any rights I might have to access this letter of recommendation under the Family Educational Rights and Privacy Act of 1974.

_____
Signature Date

☐ 2. I do not agree to the waiver above.

_____
Signature Date

Applicant: Insert the name and campus box number of the department to which you are applying for graduate work and return this form to the department and address listed here:

Department of _____
Graduate Admissions
University of Colorado at Boulder
_____ UCB (campus box number)
Boulder, CO 80309

II. **To the recommender:** This form is intended solely for your convenience; its use is optional. Before you agree to submit a recommendation, whether on this form or on your own stationery, please review the reference to the federal law entitled the Family Educational Rights and Privacy Act of 1974 as presented above in our instructions "To the applicant."

We solicit your candid evaluation of the applicant's preparation for graduate study, range of abilities and accomplishments, and creative and intellectual promise. **On the back of this form, or on your own stationery, please summarize your opinion of (a) the quality of the applicant's academic or creative achievements, including material not apparent on the official transcripts; (b) the applicant's scholarly or creative potential and promise for advanced and original work; (c) those aspects of the applicant's personality and character significant to graduate study; and (d) the applicant's special skills and experience where demonstrated in an art, vocation, or profession.** We would appreciate knowing the extent of your contact with the applicant and any special opportunities you may have had to observe him or her.

III. **Summary Evaluation**

Compare the applicant with other individuals of similar training and experience with whom you have been associated. Use the following numerical scores. Mark every line; insert "X" if insufficient knowledge to rate and "NA" if not applicable.

1 = Outstanding—Comparable to the best individual in a current class or research laboratory—upper 5%
2 = Excellent—upper 6–10%
3 = Very Good (Above Average)—upper 11–30%
4 = Good (Average)—middle 31–50%
5 = Fair (Below Average)—lower 50%

____ Intellectual ability
____ Imagination and creativity
____ Ability in oral expression
____ Writing ability
____ Quality of previous work
____ Research aptitude
____ Promise as a professional in the field

_____
Recommender's Signature Date

_____
Name Printed or Typed Title

_____
Address