RECOMMENDATION FOR ADMISSION TO
GRADUATE SCHOOL IN PSYCHOLOGY
Stephen F. Austin State University

Applicant's Name ____________________________________________

___ I waive my right to review this document.

___ I do not waive my right to review this document. Date ________ Applicant's Signature ____________________________

Applicant: This form should be given to persons who are qualified to comment on your qualifications for graduate study in psychology. For the convenience of those persons, you should provide an addressed, stamped envelope.

Recommendation

1. I have known the applicant for _______ years _______ months.

2. I know the applicant [ ] slightly [ ] fairly well [ ] very well

3. I have known the applicant as:
   [ ] a student in _____ class(es).
   [ ] an assistant. [ ] an advisee. Other ________________________________

4. Please rate the applicant on the following characteristics, with graduating seniors as your reference group.

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<thead>
<tr>
<th>Characteristics</th>
<th>No Basis for Judgment</th>
<th>Lower 50%</th>
<th>Upper 50%</th>
<th>Upper 25%</th>
<th>Upper 10%</th>
<th>Upper 5%</th>
<th>My confidence in this rating</th>
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</table>
5. Is the applicant's academic potential greater or less than indicated by his/her grades?

[ ] much less       [ ] less       [ ] equal       [ ] greater       [ ] much greater

6. How would you rate the applicant's research potential?

[ ] poor       [ ] fair       [ ] good       [ ] very good       [ ] exceptional       [ ] no basis for judgment

7. How would you rate the applicant's potential for clinical or counseling work?

[ ] poor       [ ] fair       [ ] good       [ ] very good       [ ] exceptional       [ ] no basis for judgment

8. Indicate the strength of your overall endorsement of this student.

[ ] not recommended       [ ] recommend with reservation       [ ] recommend       [ ] highly recommend

9. If you feel that there are strengths or weaknesses that would help us evaluate this applicant, and are not included in the items above, please comment in the space below or include an additional sheet.

Thank you for your evaluation of this applicant.

Name _____________________________                      Position _____________________________

Signature ___________________________                      Email address __________________________

Institution or Affiliation _____________________________

Address

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________