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 E-Signature_____

Applicant: After completing the top part of this form, e-mail it as an attachment to three individuals who are qualified to comment on your qualifications for graduate study in psychology.

Evaluator: Please e-mail the completed recommendation form to Dr. James Schaeffer, Graduate Program Coordinator, at graduatepsychology@sfasu.edu.

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.

Characteristics	No Basis for Judgment	Lower 50%	Upper 50%	Upper 25%	Upper 10%	Upper 5%
Academic Ability						
General Knowledge						
Oral Expression Skills						
Written Expression Skills						
Desire to Achieve						
Independence & Initiative						
Potential for Success						
Research Skills						
Professional Commitment						

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 judgement

7. How would you rate the applicant's teaching potential?

   [   ] Poor   [   ] Fair   [   ] Good   [   ] Very good   [   ] Exceptional   [   ] No basis for judgement

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

   [   ] Not recommend   [   ] 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 _____

_____

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