



UNIVERSITY of NEW HAMPSHIRE GRADUATE SCHOOL - RECOMMENDATION FORM

Thompson Hall - 105 Main Street
Durham, New Hampshire 03824

Website: gradschool.unh.edu Email: grad.lor@unh.edu

Note this is the PAPER (Printed) ONLY VERSION of the Letter of Recommendation Form

TO THE APPLICANT:

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Last Name (Surname)

First Name

Middle Name

UNH Student ID (if available,
otherwise leave blank)

Degree Sought: _____

In: _____

I HEREBY WAIVE ANY RIGHT TO EXAMINE THIS LETTER OF RECOMMENDATION. I REALIZE THAT THE UNIVERSITY WILL UTILIZE THIS RECOMMENDATION ONLY IN CONJUNCTION WITH CONSIDERATION OF MY ADMISSION TO THE GRADUATE SCHOOL AND THE AWARD OF ANY FINANCIAL AID. I REALIZE THAT A WAIVER OF MY RIGHT OF ACCESS TO THIS RECOMMENDATION IS NOT A CONDITION OF MY ADMISSION OR FINANCIAL AID.

I agree to the above waiver: YES NO

Signature of Applicant (type in your name here)

Email Address of Applicant

Date Signed

TO THE REFEREE:

Your cooperation in providing a candid evaluation of the above named applicant's preparation for and ability to succeed in graduate study will be appreciated. If the applicant has agreed to the above waiver, the Graduate School will hold the letter as confidential. When you have completed this form you can A) mail it to the address at the top of the form; B) Fax it to 603-862-0275; or C) Scan and email it to grad.lor@unh.edu. If you are including an additional letter, please be sure the letter includes both your name and the applicants, and send it in the same format as this form (mail, fax or email).

1. How long have you known the applicant and in what capacity? (If you need more space, please include this question in your attached letter.)

2. In comparison with others with whom you have taught or worked, please rate the applicant in the following areas:

	Unable To Judge	Below Average	Average Upper 50%	Good Upper 20%	Very Good Upper 10%	Outstanding Upper 5%
Academic Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Analytical Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Written Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative and Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpersonal Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Please check the category below that most accurately summarizes your recommendation:

Highly recommended Recommended Recommended with reservation I do not recommend the applicant

4. Please indicate below if you will be including a letter. If sending a letter, please include it with this form and send it in the same manner (mail, fax or email).

Yes, I will be including a letter No, I will not be including any additional material

Referee's Last Name

Referee's First Name

Referee's Middle Name

Referee's Position

Institution

Telephone No. (with area code)

Address

Signature of Referee (type in your name here)

Email Address of Referee

Date Signed by Referee