



# Graduate Programs Admission Reference Request Form

## Part 1 - Completed by Applicant

Last	First	Middle	Social Security Number
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**Applicant's Waiver of Right to Access:** The Family Educational Rights and Privacy Act of 1974, as amended (P.L. 93-380), allows a candidate for admission to waive his or her right of access to confidential letters or statements written on his or her behalf if the recommendation is used solely for the purpose of admission and if the candidate, upon request, is notified of the names of all persons making such recommendations on his or her behalf. The University does not require such a waiver as a condition for admission. However, under the legislation, the applicant has the option of signing such a waiver as follows:

I hereby waive my right of access to this recommendation and any appropriate attachments that have been written by (name of recommender) \_\_\_\_\_, on behalf of my application for admission to the Franklin University Graduate Program. This waiver is effective insofar as the recommendation is used solely for the purpose of admission.

Signature	Date
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## Part 2 - Completed by Recommender

**Note to Recommender:** The person whose name appears above is applying for admission to the Franklin University Graduate Program. Your candid assessment of the applicant will greatly assist us in making a decision that is good for both the applicant and the Program. Federal law may require that your letter be shown to the applicant. Please refer to the section above titled "Applicant's Waiver of Right to Access." We appreciate the time and effort you are making to provide us with this information.

I have known the applicant for approximately \_\_\_\_\_ years \_\_\_\_\_ months.

Define the nature of your relationship to the individual who applying to the Graduate Program:

- Professional
- Academic (Please list the courses this individual completed)  

Course name:	When taken:	Grade:
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- Other (Explain):

What do you consider to be the applicant's strengths or talents?

What do you consider to be the applicant's weaknesses or challenges?

How will a graduate education help the applicant realize his or her goals?

Please give us your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison to other graduate program applicants whom you have known or "fast management track" persons within your organization.

	Exceptional (Top 5%)	Above Average (Top 25%)	Average	Below Average (Lower 25%)	Not Observed
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation: willingness to work intensely toward goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to manage time wisely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical ability: problem recognition, structuring and solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability in oral expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please feel free to comment on the ratings you assigned in the previous section and to make an additional statement about the applicant's record, potential or personal qualities that will help us reach a decision.

How would you recommend this applicant for admission into a Franklin University Graduate Program?

- Strongly recommend                       Recommend  
 Recommend with reservations               Not recommend

Printed Name

Signature

Date

Highest level of education completed

- Ph.D.               Master's               Bachelor's               Associate's               Other

Title

Organization

Address

City

State

Zip

Phone

Email Address

**Please return this Reference Request at your earliest convenience to:**

Franklin University Graduate Admissions & Services, 201 S. Grant Ave, Columbus, OH 43215 (Fax 614.947.6771)