

RECOMMENDATION FORM

Graduate Programs in Education
Goucher College
1021 Dulaney Valley Road
Baltimore, Maryland 21204-2794
(410) 337-6047
Fax: (410) 337-6394

Check appropriate program:

- GOUCHER COLLEGE ♦ SHEPPARD PRATT MASTER OF EDUCATION PROGRAM
- GOUCHER COLLEGE MASTER OF ARTS IN TEACHING PROGRAM
- GOUCHER COLLEGE POST-BACCALAUREATE PROFESSIONAL DEVELOPMENT

PART I: TO BE COMPLETED BY THE APPLICANT

Please print or type.

Name _____

Last

First

Middle

Social Security Number _____

I agree that the recommendation that I am requesting shall be held in confidence by officials of Goucher College, and I hereby waive any rights I may have to examine it. Yes No

PART II: TO BE COMPLETED BY THE RECOMMENDER

Please print or type.

How long and in what capacity have you known the applicant?

STATEMENT

We would appreciate your assessment of the applicant's scholarship, personality, character and professional promise. Please include in the statement an assessment of strengths and weaknesses. If you need more space, please feel free to use a separate sheet. If you prefer, you may write the entire statement on your own stationery.

SUMMARY EVALUATION

Please indicate the applicant's promise as a graduate student, in comparison with others of similar age and experience, by placing an "X" in appropriate boxes.

	<i>Below Average</i>	<i>Average</i>	<i>Above Average</i>	<i>Unusual</i>	<i>Outstanding</i>	<i>Truly Exceptional</i>	<i>Inadequate Opportunity To Observe</i>
Ethics and integrity							
Research aptitude							
Intellectual potential							
Ability to work with others							
Creativity and imagination							
Maturity							
Self-confidence							
Oral communication skills							
Written communication skills							
Problem-solving ability							
Motivation for proposed program of study							
Potential as a teacher							
Potential for career advancement							

Please indicate the strength of your overall endorsement by placing an "X" along the scale.

Not recommended	Recommended with some reservations	Recommended	Highly recommended
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Signature _____

Please print last name _____ Date _____

Job Title _____

Employer _____

Street _____

City _____ State _____ Zip Code _____

Please mail to: Graduate Programs in Education, Admissions Office, Goucher College, 1021 Dulaney Valley Road, Baltimore, Maryland 21204-2794.