

**RECOMMENDATION FORM**

**W. P. Carey School of Business – Undergraduate Programs  
P.O. Box 873406, Tempe, AZ 85287-3406. USA**

**TO BE COMPLETED BY STUDENT**

Please fill in your name and address below, sign, and give this form to the individual you have chosen to write on your behalf. The recommender should complete this form and return it to you in a sealed envelope signed across the flap.

**APPLICANT'S WAIVER OF RIGHT TO ACCESS TO CONFIDENTIAL STATEMENT**

Name of Applicant: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

I hereby freely and voluntarily waive my right to any information contained in this recommendation and agree that the statement shall remain confidential.

\_\_\_\_\_  
Signature of Applicant ASU Affiliate ID# Date

**TO THE RECOMMENDER**

The information that you are providing concerning the above named applicant is considered by the application committee. Your time and thoughtfulness in furnishing this information are greatly appreciated.

Recommendations are used for admissions purposes only and do not become part of the permanent record file upon a student's matriculation. Therefore, recommendations are not subject to the provisions of the Family Educational Rights and Privacy Act of 1974.

After completing this form, please sign it and place it in an envelope. Seal the envelope, sign it across the flap, and then return it to the applicant who will submit the sealed envelope along with his/her complete application package to the W. P. Carey School of Business – Undergraduate Programs. Please type or print neatly.

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

\_\_\_\_\_  
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Please give us your appraisal of the applicant (circle a rating) relative to his or her peer group across the following criteria; provide comments as appropriate.

<b>Analytical ability</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Quantitative ability</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Oral communication</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Written communication</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Class contribution (for faculty only) Contribution to organization</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Maturity</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Motivation</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

<b>Ability to work with others</b>	<b>Exceptional</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Unable to Assess</b>
<b>Comments:</b>					

Overall assessment of candidate's academic and professional fit for the program:

\_\_\_\_\_ Strongly recommend \_\_\_\_\_ Recommend \_\_\_\_\_ Recommend with reservations \_\_\_\_\_ Do not recommend

**If you would like to make additional comments about the applicant, please attach a separate sheet.**

Name and title of recommender \_\_\_\_\_

Institution \_\_\_\_\_

Recommender's Address: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Thank you for your time.

*Arizona State University is committed to a policy of nondiscrimination on the basis of race, color, national origin, religion, sex, sexual orientation, age, handicap, or veteran status.*