

GRADUATE ADMISSION REFERENCE FORM

Name:			
LAST	FIRST	MIDDLE	MAIDEN NAME
Address:			
City/State:			Zip:
Email Address:			
What semester are you	applying for? Fall	Spring _	Summer
		year	year year

Please specify graduate program: (please check box)

Biology (M.S.)	Education,	Special Education	Plant & Soil	Public Administration
	General (Ed.S.)	(M.Ed.)	Science (M.S.)	(MPA)
Business	Elementary	Family &	Plant & Soil	Systems and Materiel
Administration	Education	Consumer	Science	Engineering (M.Eng.)
(MBA)	(M.Ed.)	Sciences (M.S.)	(Ph.D.)	
Communications	Instructional	Food Science	Physics (M.S.)	Urban & Regional
Specialist (M.S.)	Leadership	(M.S.)		Planning (M.U.R.P.)
	(M.Ed.)			
Communicative	Pre-Elementary	Food Science	Applied Physics	Electrical Engineering
Sciences and	Education	(Ph.D.)	(Ph.D.)	(M.S.)
Disorders (M.S.)	(M.Ed.)			(111.0.)
Computer Science	Secondary	Kinesiology	Counseling	Mechanical
(M.S.)	Education	(M.S.)	Psychology	Engineering (M.S.)
	(M.Ed.)		(M.S.)	

All Social Work majors, please refer to the Social Work packet for required reference form.

I waive____/do not waive____ my rights to access the information on this recommendation form. The information will be reviewed by the admissions committee.

Applicant Signature:	Date:

Reference Evaluation

Please complete this reference form for the above applicant. The following information is used by our Academic Admission Committee to evaluate the academic and personal strengths of this individual. This evaluation form is completely confidential. We appreciate your participation.

Describe your relationship with the applicant. How well do you know him or her?

What are some strengths of the applicant? Please give specific examples of accomplishments that prove his or her ability to excel in our program.

What are some attributes upon which the applicant can improve?

	Above Average	Average	Below Average	Poor
Analytical skills				
Emotional stability				
Ethical performance				
Intellectual ability				
Leadership skills				
Motivation				
Reputation				
Verbal communication skills				
Written communication skills				

Please evaluate the applicant on the following items: (by placing an "X" mark)

If you wish, you may attach additional comments regarding the applicant.

Signature:	Date:
Please print name:	Title:
Address:	Phone Contact:

Thank you for your cooperation. For additional information please contact the School of Graduate Studies at 256-372-5266, or email gradschool1@aamu.edu.

Please send the recommendation via email to gradschool1@aamu.edu, fax to (256) 372-5269 or mail to P.O. Box 998, Normal, AL 35762.