

Letter of Recommendation

Speech/Language/Hearing Sciences • Minnesota State University Moorhead
1104 7th Avenue South • Moorhead, MN 56563
Phone: 218.477.2286 (V/TDD) • FAX: 218.477.4392

This recommendation must be postmarked by February 1 (January 1st if you are an International Student)
Send To: Graduate Studies Office, MSUM, 1104 7th Ave. S., Moorhead, MN 56563

TO THE APPLICANT:

This form should be given to a professor (or a supervisor under whom you have studied or taught or worked) who is able to comment on your qualifications for graduate study. Type or print the first four lines yourself.

Applicant's Name _____
(Last) (First) (Middle)

Mailing Address: _____ City/State/Zip _____

Name of Recommender: _____

Title: _____ Institution: _____

TO THE RECOMMENDER:

Please rate the applicant with others of the same academic level. It is important to the candidate that you give a percentage rating here as well as a verbal evaluation on the reverse side.

Please be advised that under the Minnesota Government Data Practices Act, all references are available to the applicant upon request.

This form must be returned to us by February 1st.

	Lower Third	Middle Third	Upper Third	Upper 10%	Upper 5%	Not able to judge
Organization						
Soundness of Judgment						
Verbal Communication Ability						
Writing Ability						
Competence In Chosen Field						
Motivation to Succeed						
Creativity or Research Potential						
Work Habits						
Emotional Stability						
Professional Behavior						
Interpersonal Relationships						

_____ **Academic Potential:** Please estimate the applicant's academic potential for the completion of the master's degree on a scale of 1 (poorest) to 7 (best.)

_____ **Clinical Potential:** Please estimate the applicant's clinical potential on a scale of 1 (poorest) to 7 (best.)

Letter of Recommendation (continued)

EVALUATION OF APPLICANT: Please evaluate the applicant's suitability as a graduate student. Include length of time you have known the applicant; in what capacity you have known the applicant, etc. Do not include information that might indicate the individual's race, color, national origin, citizenship status, religion, creed, age, disability, gender (unless by the individual's name it is obvious,) sexual orientation, marital status, or status with regard to public assistance. In compliance with Section 504 of the Rehabilitation Act of 1973, we discourage you from referring directly or indirectly to an applicant's handicap. (If needed, attach additional pages.)

Signature of Recommender _____ Date _____

TO: Anyone Requesting Letter of Recommendation for Graduate School

RE: Procedures

Yes, I am willing to write a recommendation for you to be admitted to grad school elsewhere, under the following conditions:

- Provide addressed and stamped envelopes as appropriate
- Complete the following information questionnaire
- Fill out and sign the attached **Reference Request Form from Career and Placement Service**

Your name: _____ How long you have known me: _____

Courses you have taken from me, semesters, and grades earned:

Topics of term paper(s) written for me, if any:

Other contact we've had for advising, clinic supervision, etc.:

List of pertinent extra curricular activities, employments, and volunteer work:

The strengths you see in yourself that would make you a good graduate student:

Please list dates that applications are due:

Candidate Information Sheet

NOTE TO CANDIDATE:

Letters of reference (also referred to as recommendations) assist employers and graduate schools in making their candidate selections.

Please follow these steps in obtaining references:

1. Carefully select reference writers who know you well enough to give specific examples of your relevant skills, training, experience, work style or character traits.
2. Ask the individuals you select if they are willing to serve as a reference for you and if they say yes, provide this completed form for their use. You also may want to provide a copy of your resume.
3. Insert the individual's name on the Authorization To Provide Reference Form that is at the bottom of the page. Sign your name and date the authorization. **Inform the writer of the reference that the signed authorization should be retained for future reference.**

CANDIDATE: Please complete the following:

Name _____ Dragon ID # or SS# _____

Degree(s): B.A. B.S. Other _____

Major(s): _____ Minor(s): _____

Certifications: _____

1. In what capacity does this reference writer know you (classroom instructor, advisor, internship supervisor, current or former employers, university or community organization, other)? List all that apply. Include relevant dates.

2. Career Goal: What job(s) are you seeking or for what program are you applying to graduate school?

3. What are the key skills, knowledge/training, experience, work style or character traits that you have that potential employers or schools may be seeking?

4. Please list employment, internships, volunteer work, related projects, extracurricular, leadership or group activities or other experiences that may be used as evidence to support your capabilities. **(Attach a resume or an additional page to ensure that you provide adequate information to highlight your strengths.)**

5. Significant accomplishments (from items in #4 above that you have not included or that are not on your resume).

Please have all letters of reference returned to you. Provide a stamped envelope, addressed as indicated, as a courtesy to references who are off-campus.

Authorization to Provide Reference

I authorize (Name of your reference writer) _____ to provide information related to my professional capabilities/skills, grades/GPA, character traits or other personally identifiable information from my education record in a written letter (or telephone follow-up) to prospective employers, educational institutions and foundations for the purpose of assisting me in obtaining employment, admission to graduate school, fellowships, and/or scholarships.

Candidate's signature _____ Date: _____

REFERENCE WRITER: Please read reverse side and retain this authorization for your records

Career Services

114 Comstock Memorial Union, 1104 7th Avenue South, Moorhead, MN 56563
Phone: 218.477.2131 – Fax: 218.477.2430
e-mail: careers @mnstate.edu – <http://www.mnstate.edu/career>

Dear Reference Writer:

Thank you for agreeing to write a letter of reference for the student/alumnus/alumna who has provided the above authorization for you to serve as a reference on the reverse side of this page. **Please retain the authorization in your file.**

It is our hope that you will be able to write an objective and meaningful reference to support this candidate. If you feel that you cannot write positively in behalf of the candidate, please discuss this with them and feel free to deny their request for a reference. Please note that according to Minnesota Statutes, all references written after August 1, 1974 may be reviewed by the candidate upon request.

In an effort to assist you in writing as positive and relevant a reference as possible, we have encouraged the candidate to complete the back of this sheet highlighting some of her or his significant accomplishments and experiences (they also may choose to attach a resume). Listed below are some suggested guidelines that may be of help to you as you write the letter.

**Please use company, agency, or university letterhead stationery, if possible.
Use a letter-quality printer or a laser printer to ensure that a readable copy can be made.**

GUIDELINES FOR REFERENCE WRITERS

- Do not give out information about the candidate without the candidate's written consent. The authorization statement above should be signed by the candidate.
- Address the letter "To Whom It May Concern" or title it "Reference for (Candidate's Name Here)."
- Be sure to use the correct spelling of the candidate's name and do not use a courtesy title that denotes marital status..
- Know the purpose of the letter. Will it be used to apply for a variety of opportunities or for a specific type of opportunity (graduate school, internship or employment only). Target your letter accordingly.
- Use specific examples, based on your professional experience with and/or observation of the candidate, to support what you are relating about him or her.
- Convey factual information (rather than subjective judgments) on how the candidate has performed in your class, on the job, in an internship or an organization, etc. Be able to document all of the information you release.
- If you express an opinion, clearly identify it as an opinion and explain the circumstances upon which you base the opinion.
- Be positive, honest and objective.
- Do **not** include information that might indicate the individual's race, color, national origin, citizenship status, religion, creed, age, disability, sex (unless by the individual's name it is obvious), sexual orientation, marital status, or status with regard to public assistance.
- **Keep a copy of the letter of reference for your file along with this authorization.**

Forward reference to the student.

Minnesota State University Moorhead is an equal opportunity educator and employer.

This information will be made available in alternate format, such as Braille, large print or audio cassette tape, upon request by contacting Disability Services at 218.477.2652V or 218.477.2047/TTY. For TTY communication, contact the Minnesota Relay Service at 1.800.627.3529.