Master of Science Educational Technology

PITTSBURG STATE UNIVERSITY COLLEGE OF EDUCATION GRADUATE STUDY RECOMMENDATION FORM

Applicant's Name					PSU ID #			
	Last	First		Middle				
I	Program Emphasis:'	""""" Libtaty'O gf kc '""	"""Vgej pqı	qi{"Kpvgi	tcvkqp			
Recommender's Name								
	Last	First		Middle				
To the applicant: Cor Please choose whether will not be considered	or not you wish to	waive your right of acc	cess to this					
I waive my rig	hts to see this form	and any supplementar	y comment	s or letter	, if writte	n.		
I do <u>not</u> waive	my rights to see this	s form and any supple	mentary co	mments o	r letter, if	written.		
Signature		Date						
The person named above Pittsburg State Univers cooperation.								
1. a. How long hav	ve you known the ap	oplicant? L	ess than on	e year _	Y	Years		
b. How do you l	know the applicant?							
2. Please rate the app	olicant on the traits s	shown below using the	following	rating sca	ıle:			
2	Candidate consisCandidate incons	we average in display of tently displays the displays the displays the display this disposi	position. isposition.	osition.		Not Able to Judge		
Academic Ability for	Graduate Work	1	2	3	4			
Communication Skills		1	2	3	4			
Success in Forming Professional Relationships		ships 1	2	3	4			
Motivation and Diligence		1	2	3	4			
Openness to Self-Examination as it relates to Personal and Professional Development		s to 1	2	3	4			
Potential as a Practitioner		1	2	3	4			

3. If you alone were making the decision for admission, which of the following would it be?
Accept - The applicant should complete the master's degree and be a successful practitioner.
Accept, but with reservation - Please explain including comments concerning ability,
motivation, or personal characteristics to be successful as a student and/or practitioner.
Do not accept - Please explain.
4. Please provide a few comments giving your evaluation of the applicant's suitability for study with special reference to initiative, intelligence, and ability to complete tasks on time. A statement about the applicant's emotional stability, maturity, and ability to collaborate with colleagues and supervisors would be particularly important for individuals applying to our practitioner programs.
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Name (Print or Type)
Title/Position
Signature
Address
Telephone

Please complete and return this form promptly via email to: teachered@pittstate.edu