

Master of Science - School Health

PITTSBURG STATE UNIVERSITY
COLLEGE OF EDUCATION
GRADUATE STUDY RECOMMENDATION FORM

Applicant's Name _____ PSU ID # _____
Last First Middle

Recommender's Name _____
Last First Middle

To the applicant: Complete the information requested above and give to the person serving as a reference. Please choose whether or not you wish to waive your right of access to this recommendation. Your application will not be considered unless you have checked and signed this section.

I waive my rights to see this form and any supplementary comments or letter, if written.

I do not waive my rights to see this form and any supplementary comments or letter, if written.

Signature _____ Date _____

The person named above is applying for admission to Graduate School in the College of Education at Pittsburg State University. Please complete the following for the applicant. Thank you for your assistance and cooperation.

1. a. How long have you known the applicant? _____ Less than one year _____ Years
b. How do you know the applicant?

2. Please rate the applicant on the traits shown below using the following rating scale:

- 1 - Candidate is above average in display of this disposition.
- 2 - Candidate consistently displays the disposition.
- 3 - Candidate inconsistently displays the disposition.
- 4 - Candidate does not display this disposition.

Not Able
to Judge

Academic Ability for Graduate Work	1	2	3	4
Communication Skills	1	2	3	4
Success in Forming Professional Relationships	1	2	3	4
Motivation and Diligence	1	2	3	4
Openness to Self-Examination as it relates to Personal and Professional Development	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**