Master of Science in Teaching

PITTSBURG STATE UNIVERSITY COLLEGE OF EDUCATION GRADUATE STUDY RECOMMENDATION FORM

Applicant's Name					PSU ID #	:	
Last	Fir	rst	M	liddle			
Recommender's Name						_	
	Last	First		Mide	dle		
To the applicant: Complete Please choose whether or not will not be considered unless	you wish to waive yo	our right of acc	ess to this	ne person recomme	serving a	s a reference. Your application	
I waive my rights to s	ee this form and any	supplementary	comment	s or letter	, if writte	n.	
I do <u>not</u> waive my rigi	hts to see this form a	nd any supplen	nentary co	mments o	r letter, if	written.	
Signature	re Date						
The person named above is ap Pittsburg State University. Ple cooperation.							
1. a. How long have you known the applicant		? Le	Less than one year _			Years	
b. How do you know th	ne applicant?						
2. Please rate the applicant of	on the traits shown be	elow using the	following	rating sca	le:		
2 - Cano 3 - Cano	didate is above avera didate consistently di didate inconsistently didate does not displa	isplays the disp displays the di	osition.	osition.		Not Able to Judge	
Academic Ability for Gradua	te Work	1	2	3	4	-	
Communication Skills		1	2	3	4		
Success in Forming Professio	nal Relationships	1	2	3	4		
Motivation and Diligence		1	2	3	4		
Openness to Self-Examinatio Personal and Professional De		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