## RECOMMENDATION FORM

| Applicant's name (as on passport: Last, First, Middle)                         |                            |  |  |                               |   |                                    | Date of Birth           |                       |  |
|--|----------------------------|--|--|-------------------------------|---|------------------------------------|-------------------------|-----------------------|--|
| Mailing Address (Street,   | City, State, ZIP, Country) |  |  |                               |   |                                    |                         |                       |  |
| Other names used   |                            |  |  |                               |   | Sex                                | ☐ Male                  | ☐ Female              |  |
| recommendation will  I agree to waive and I do not agree to waive.             |                            | nission purposes<br>t. The individual b<br>atement. I would li | <b>, accordi</b><br>elow may<br>ke to revi | ng to th<br>mail/faxew this r | e Family Educ<br>this directly to<br>ecommendatio | <b>ational Righ</b><br>APU.        | ts and Privac           |                       |  |
| The above-named application him/her. We greatly application                    |                            |  |  |                               |   | sking you to                       | o write a reco          | ommendation for       |  |
| Have you ever been dismissed and/or disqualified from any school?  What is you |                            |  |  |                               |   | our relationship to the applicant? |                         |                       |  |
| What strengths have yo   | ou observed in this app    | licant that would a  | affect his/                                | her univ                      | ersity studies?                                   |                                    |                         |                       |  |
| What weaknesses have   | you observed in this a     | applicant that wou   | ıld affect l                               | his/her u                     | niversity studie                                  | s?                                 |                         |                       |  |
| Please evaluate the app  | blicant on each factor li  | sted below.  |  |                               |   |                                    |                         |                       |  |
|  | Superior Above Av          |  | rage Average                               |                               | Below Average                                     |                                    | Do Not Know             |                       |  |
| Academic aptitude  |                            |  |  |                               |   |                                    |                         |                       |  |
| Adaptability   |                            |  |  |                               |   |                                    |                         |                       |  |
| Cooperation  |                            |  |  |                               |   |                                    |                         |                       |  |
| Dependability  |                            |  |  |                               |   |                                    |                         |                       |  |
| Emotional stability  |                            |  |  |                               |   |                                    |                         |                       |  |
| Interpersonal relations  |                            |  |  |                               |   |                                    |                         |                       |  |
| Leadership ability   |                            |  |  |                               |   |                                    |                         |                       |  |
| Motivation/initiative  |                            |  |  |                               |   |                                    |                         |                       |  |
| Oral communication   |                            |  |  |                               |   |                                    |                         |                       |  |
| Personal integrity   |                            |  |  |                               |   |                                    |                         |                       |  |
| Written communication  |                            |  |  |                               |   |                                    |                         |                       |  |
| Additional comments yo   | ou would like to add th    | at will help us gair   | n a better                                 | underst                       | anding of this a                                  | pplicant:                          |                         |                       |  |
| What is your recommer  | ndation for the admissi    | on of this applicar  | nt? 🗆 I                                    | recomm                        | end. 🗆 I rec                                      | ommend wit                         | n reservation.          | ☐ I do not recommend. |  |
| Name (Last, First, Middle)   |                            |  |  | Signature                     |   |                                    | Date (Month, Day, Year) |                       |  |
| Address (Street, City, State   | e, ZIP, Country)           |  | 1  |                               |   |                                    |                         |                       |  |
| Phone  |                            | Fax  |  |                               |   | Email                              |                         |                       |  |
| Institute/Employer   |                            |  |  |                               |   | Business phone                     |                         |                       |  |