Recommendation for Graduate Admissions

To the Applicant

Please fill out the following section and provide it to someone most able to evaluate your personal and professional abilities and potential. It is important that your reference include this form with their recommendation letter. If that is not possible, your recommender needs to include your full name (as it appears on your application form), birthdate and graduate program on their recommendation letter.

Applicant Legal Name
______________________________________________________________________________________________
LAST/FAMILY NAME FIRST/GIVEN NAME MIDDLE/ADDITIONAL NAME

Date of Birth

________________ / ___________/ ____________
MONTH DATE YEAR

Program
_________________________________________________________________________________________________________

To the Recommender

The student whose name appears above is a candidate for admission to the University of San Francisco. We would value your candid appraisal of this applicant. Please complete the remainder of this form as soon as possible and return to the following address:

Graduate Admissions Office
School of Management
University of San Francisco
101 Howard Street, Suite 500
San Francisco, CA 94105
Email: management@usfca.edu
Comparative Evaluation

Please rate this candidate in terms of the following attributes:

<table>
<thead>
<tr>
<th>Attribute</th>
<th>SUPERIOR (TOP 10%)</th>
<th>GOOD (TOP 30%)</th>
<th>FAIR (MIDDLE 30%)</th>
<th>POOR (BOTTOM 30%)</th>
<th>UNABLE TO JUDGE</th>
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<tbody>
<tr>
<td>Intellectual Ability</td>
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<td>Analytical Skills</td>
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<td>Maturity</td>
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<td>Leadership Potential</td>
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<td>Written/Oral Expression</td>
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<td>Initiative/Motivation</td>
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<td>Self-confidence</td>
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<td>Teamwork</td>
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</table>

Group used for this comparison (such as employees or students): ______________________________________________________________

Written Recommendation

We would appreciate your candid response to the following questions. Please include a separate sheet for your written recommendation.

1. In what capacity have you known the applicant and for how long?
2. What strengths and weaknesses has the applicant demonstrated in professional (or academic) situations?
3. Please comment on the applicant’s intellectual, analytical, and communication (both written and oral) skills.
4. How effective are the candidate’s interpersonal skills with classmates and professors and/or peers, managers and subordinates?
5. How would you assess the candidate’s potential for success in this graduate program and in the candidate’s desired career?

_________________________________________________________________________________________________________________

SIGNATURE OF RECOMMENDER DATE

Recommender Name

LAST/FAMILY NAME FIRST/GIVEN NAME MIDDLE/ADDITIONAL NAME

POSITION

TELEPHONE NUMBER EMAIL ADDRESS

Institution/Organization

INSTITUTION/ORGANIZATION NAME

STREET ADDRESS

CITY STATE ZIP OR POSTAL CODE