



## Recommendation for Mitchell College Program Admission

Name of Applicant \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

In what capacity do you know the applicant? \_\_\_\_\_

Your assessment of this applicant will help the Honorable Faculty evaluate the abilities in seven major areas. Please provide your comments on this applicant in the following:

| Areas                                   | Outstanding | Above Average | Below Average | Other comments |
|---|-------------|---------------|---------------|----------------|
| Critical & Creative Thinking            |             |               |               |                |
| Communication                           |             |               |               |                |
| Openness to perspectives different from |             |               |               |                |

Information

**Letter of Recommendation Requirement**

Please attach a letter of recommendation on behalf of the student, including your

NAME:

SIGNATURE

POSITION:

DATE: