To the Applicant
Reference or recommendations should be given by people who are familiar with your qualifications for graduate study. Two letters of recommendation are required for admission to the master's degree program.

Full Legal Name_____
Last First Middle

Personal Identification Number_____
(For returning CSU-Pueblo students only)

To the Person Providing Reference/Recommendation

Type or print your letter of recommendation either on the back of this form or on your own letterhead. Be sure to return both the Letter of Recommendation Form and your Letter of Recommendation. This recommendation will be used by Colorado State University – Pueblo only in its procedures related to admission. If the student has not waived the right of access to recommendation, it will be accessible to the student if he/she enrolls in the degree program at Colorado State University – Pueblo. When you have completed the recommendation letter, please enclose this form and your letter in an envelope, seal the envelope, and sign it across the seal. Return it to the applicant to forward with his/her other application materials. Thank you for your assistance.

Write as candidly as possible about the applicant's qualifications and potential to carry out advanced studies in the field and at the master's degree level. In evaluating such qualities as the applicant's motivation, intellect, creativity, discipline, and maturity, discuss both strengths and weaknesses. It would be most helpful if you can recall specific instances in which these qualities were revealed to you. If it is possible for you to compare this student with others you have recommended for graduate study, please do so. How long and in what capacity have you known the applicant?_____

How does the applicant rank in comparison to other individuals you have recommended for graduate study?

	Top 5%	Top 10%	Top 25%	Top 50%	Bottom 50%	No Basis
Creativity						
Collaborative Skills						
Scholarship						
Emotional Maturity/Stability						
Writing Ability						
Skill in Oral Presentations						
Motivation						
Professional Potential						
Overall Potential for Graduate Studies						

Name:_____ Title:_____

Signature:_____ Date:_____

Institution:_____ Address:_____