



Graduate Assistantship Letter of Recommendation

Please type or print.

Section 1. To be completed by the applicant:

Last Name	First	Middle/Maiden	UID#		
Street Address 1	City	State	Zip Code	Country (if not U.S.)	
Street Address 2	Area Code/Phone		Birthdate/Month, Day, Year		

has applied for a graduate assistantship in the Department of Mathematics and Statistics

I waive the rights of access to the contents of this letter. Yes No

Signature

Section 2. To be completed by the individual making the recommendation:

1. Please briefly state in what capacity and the length of time you have known the above applicant:

2. How would you rank the applicant compared with others of the same academic level and experience in the following areas:

	Highest		Average	Lowest		Don't Know
	10%	20%	40%	20%	10%	
Intellectual independence						
Capacity for analytical thinking						
Ability to work with others						
Ability to organize and express ideas clearly (orally and written)						
Initiative and enthusiasm						

3. What is your evaluation of the applicant's overall ability and motivation to succeed in graduate studies?

Signature

Date

Print Name