

Report on Graduate Applicant

INSTRUCTIONS TO APPLICANT:

Please complete the information requested below and give this form to an appropriate person who is familiar with your educational background and abilities. *Please Type or Print.*

Name of Applicant:

Last Name

First Name

Middle Initial

Purpose of this Report (check one or both):

Admissions

Graduate Teaching Fellowship

Institution: University of Oregon

Degree Objective: MFA

Department: Creative Writing Program

Phone Number: (541) 346-3944

Address: 5243 University of Oregon
Eugene OR 97403-5243

Under the Federal Law entitled the *Family Educational Rights and Privacy Act of 1974* and the *University of Oregon Student Record Policy*, registered students are given the right to inspect their records, including letters of recommendation. Opinion is divided whether letters open to review are more helpful in assessing a student's potential than those which are not. Should you wish to waive your right to have access to this evaluation, you may do so by signing the waiver below. In any case, all evaluations will be carefully considered.

I expressly waive do not waive any rights I might have to have access to this recommendation under the *Family Educational Rights and Privacy Act of 1974* and the *University of Oregon Student Record Policy*, or any other law, regulation or policy. I understand that the University of Oregon does not require me execute this waiver and is willing to review my application whether or not I sign it.

Date: _____

Signature: _____

TO THE PERSON MAKING THE EVALUATION:

As required by the *Family Educational Rights and Privacy Act of 1974* and the *University of Oregon Student Record Policy*, a student may either elect to waive or not to waive the privilege of view this recommendation. If the student has not signed the above waiver, you should consider this form to be non-confidential.

We do request that you use the form on the next page for your recommendation and return it directly to the department named above. If you need room for additional comments, please feel free to attach an additional page.

1. Please assess the candidate's qualifications and promise as a graduate student. Of particular interest are your estimates of the applicant's intellectual ability and originality of mind; motivation and capacity for independent study, creative research, and/or acquiring professional skill; promise of a career in productive scholarship and effective teaching; quality of any professional accomplishments to date; and your judgment of his/her character and personality.

See attached letter

(Continue on additional sheet if necessary.)

2. Please rate the applicant on the qualities listed below by a check mark, and if you wish, add comments you think would be helpful. Use as your standard of comparison, other graduate students in this field at your institution.

	Upper 1-2%	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Upper 75%	No Basis for Judgment
Intellectual Ability							
Academic preparation							
Independence of thought							
Judgment and maturity							
Industry and motivation							
Effectiveness of oral communication							
Effectiveness of written communication							

3. Potential of the applicant as a graduate teaching fellow:

Exceptional Adequate No basis for Judgment
 High Low

Concerning this applicant for:

Graduate Admission A Graduate Teaching Fellowship

I make the following recommendation:

Strongly Recommend Recommend with Reservations
 Recommend Do Not Recommend

Comments:

Signature: _____

Date: _____

Name: _____

Title: _____

Institution: _____

Address: _____

City: _____

State: _____ Zip: _____