



Cumberland University
Celebrating Over 150 Years of Excellence

Applicant Recommendation Form

To be completed by applicant:

Name: _____ SSN: _____
Last First Middle/Maiden

Address: _____

City/State/Zip: _____

Note to applicant:

Please fill out the information above and deliver one copy of this form to three individuals who will provide you with a recommendation. Under the Family Educational Rights and Privacy Act of 1974, students enrolled at Cumberland University have access to their educational records, including letters of evaluation. However students may waive their right to see letters of evaluation, in which case the letters will be held in confidence. If the applicant had not signed the waiver, he or she may request to see the recommendation forms after enrolling in the Graduate Studies Program at Cumberland University.

If you wish to waive your right to examine the recommendation submitted by the person to whom this form is being given, please sign here:

Signature of Applicant *Date*

To be completed by the recommender:

The person whose name appears above is applying for admission to the Graduate Degree Program at Cumberland University. It would be very helpful to the admission committee if you would give us your assessment of the applicant. This form is only a guide, and any comments are welcome. Any information you provide will be considered strictly confidential. We greatly appreciate the time and effort on your part in giving us your appraisal of this applicant.

How long have you known the applicant and in what capacity? _____

What do you consider to be the applicant's greatest attributes and abilities? _____

In what areas do you think the applicant needs the most improvement? _____

How well do you think the applicant has considered plans for graduate study? _____

How well do you think the applicant will perform in an environment that stresses a high degree of teamwork, independent thought and action, and personal motivation? _____

(over)

In terms of the qualities listed below, please evaluate the applicant:

	EXCEPTIONAL (Top 5%)	OUTSTANDING (Top 15%)	ABOVE AVERAGE (Top 33%)	AVERAGE	BELOW AVERAGE (Bottom 33%)	NOT ABLE TO RATE
Intellectual Ability						
Analytical Ability						
Ability to Work with Others						
Written Communication						
Oral Communication						
Leadership Potential						
Motivation and Organization						
Ethical Behavior						

Recommendation:

- Highly Recommended
- Recommended without reservation
- Recommend with reservation
- Do not recommend

Name: _____

Title: _____ Institution: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Signature of Recommender

Date

Please forward this form to:

**Cumberland University
Office of Graduate Admissions
One Cumberland Square
Lebanon, TN 37087-3554
Telephone: 615-444-2562 (local)
800-467-0562 (toll-free)**

Cumberland University makes no distinction in its admission policies or procedures on grounds of age, sex, religion, race, color, national origin, or physical handicap.