



PROFESSIONAL LETTER OF RECOMMENDATION FORM

Name of applicant: _____

To the applicant:

The Family Educational Rights and Privacy Act of 1974 allows a student to review his or her file. The law also permits a student to sign a waiver relinquishing the right to inspect letters of recommendation.

Your signature below constitutes a waiver. No signature means you will have the right to read this reference.

 Signature of Applicant

To the evaluator:

The above-named student has applied for admission to the School of Education at Manhattanville College and is asking for a recommendation from you as part of the admissions process. We appreciate your honesty and frankness in filling out this form.

Please answer the following questions about the above-named student.

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

2) What is your impression of the applicant's ability to undertake a graduate program in the field of education?

3) What is your impression of the applicant's potential for success in a career in teaching?



Manhattanville

COLLEGE®

SCHOOL OF EDUCATION

4) Please comment on the applicant's character, personality, maturity, stability and responsibility.

5) Overall, how would you rate the applicant as a potential graduate student?

Outstanding Good Fair Poor

6) Additional Comments:

Name of Evaluator: _____

Position/Title: _____

Organization/Affiliation: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Signature of Evaluator/Recommender

Date

Please make a copy for your files and forward the original letter in a sealed envelope to:

**Manhattanville College
School of Education
Graduate Admissions Office
2900 Purchase Street
Purchase, NY 10577**