II. Recommendation Form

To Applicant: Please complete the upper portion of the Recommendation Form and forward it to a supervisor or professor who is acquainted with your work.

Applicant

Name _____
Last First MI

Last 4 digits of Social Security Number _____

Name of the Person Completing the Form _____

Title of the Person Completing the Form _____

Family Educational Rights and Privacy Act of 1974

The purpose of this recommendation is to assist in making the admissions decision. Under the provisions of this act you have the right, if you enroll in Johns Hopkins University's Advanced Academic Programs, to see your recommendations. The act further provides that you may waive your right to see the recommendations filed for admission. Please indicate your choice and sign your name whether or not you wish to waive this right.

☐ I waive ☐ I do not waive my right of access that I may have to this recommendation form

Signature _____ Date _____

Recommender

The applicant whose name appears above has applied for admission to Johns Hopkins University. Please attach typed answers on letterhead to EACH of the questions below and fill out the checkboxes on back. When complete, return in a sealed envelope with your signature across the back flap to applicant.

Please identify each question by number on your letter.

1. How long and in what capacity have you known the applicant?
2. What do you consider the applicant's strengths?
3. Please describe any weaknesses that might impede the applicant's ability to pursue rigorous graduate study.
4. Please describe how you have observed the applicant's writing and comment on his/her ability.
5. Please describe a specific situation in which you have observed the applicant using (or not using) critical thinking skills or innovative problem solving.
6. Please comment on a specific situation in which you have observed (or not observed) the applicant learning and applying a new skill or understanding.
7. Please describe and evaluate the applicant's quantitative ability.
8. Please comment on anything else you think would be helpful to the admissions committee.

continued on next page

Recommender, Continued

9. Please rate the applicant in comparison with others applying for professional graduate education:

	Top 5%	Top 10%	Top 20%	Top 50%	Below Average	Unable to Assess	Comments
Intellectual ability							
Breadth of general knowledge							
Quantitative ability							
Analytical ability							
Quality of oral expression							
Quality of written expression							
Ability to work with others							
Emotional maturity							
Perseverance							
Promise as a program graduate							

Name of Reference _____
please print

Signature of Reference _____ Date _____

Title and Organization _____

Address _____

Telephone Number _____ E-Mail Address _____