

To the Applicant: This form must be sent directly from the person making the recommendation to the address below. Applicants may not ask to view their recommendation forms after they are completed. Therefore, you are waving your rights to review your recommendations.

Signature of Applicant: _____ Date: _____

The following is addressed towards the individual making a recommendation: The above named individual requests your recommendation for admittance to Murray State University College of Education. The College of Education appreciates your cooperation in providing the following information regarding the applicant's qualifications along with a letter of reference. Please rate the applicant's professional competence in comparison with other known individuals in a similar stage in their careers. Please place an "X" in one box for each skill. Upon completion, return this