

Please return form to:
College of Design
Attn: Graduate Coordinator
Arizona State University
PO BOX 871905
Tempe, AZ 85287-1905

Deadline: This form must be returned to the Graduate Coordinator by **January 31, 2008** in order to be considered in application packet. If form is returned by student, the recommender's ink signature must be across the closed seal.

APPLICANT INFORMATION

Name of Applicant Being Reviewed:	Date:
Program Applying To:	ASU ID Number:

REVIEW GUIDELINES

APPLICANT

To the applicant and the recommender: Under the Family Rights and Privacy Act of 1974, students who apply and matriculate at Arizona State University have access to their admission records, including letters of recommendation. Students may waive their right to see letters of recommendation, whereupon such letters will be kept confidential. Please indicate below whether or not you wish to waive this right by circling the appropriate phrase and signing your name. Either option you choose will not affect any admission decisions.

I **waive** **do not waive** any right of access that I may have to this recommendation form.

Signature	Date
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EVALUATOR

The person whose name appears above has applied for admission to a graduate program in the College of Design at Arizona State University. Your candid evaluation of this individual's ability to succeed in this course of study would be greatly appreciated. The faculty acknowledges and appreciates your time and effort in completing this evaluation. Please feel free to include a separate letter regarding your assessment of the candidate's ability to perform and succeed in a graduate program.

Name	Organization
Position/Title	Address
Address	Telephone
Email address	
Signature	

Contextual Knowledge of Candidate

How long have you known the applicant? _____ years _____ months

Under what circumstances have you known the applicant? _____

Please evaluate the applicant below in comparison to the students, employees, interns, and other professionals you have known during your professional career.

EVALUATION OF APPLICANT COMPARED TO OTHER PERSONS AT THIS LEVEL

	Top 5%	Top 10%	Average	Below Average	Unable to Judge		Top 5%	Top 10%	Average	Below Average	Unable to Judge
Independence of Thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Promise as Designer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Preparation for this Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity & Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to Work with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visual Communication Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to Apply Analytical Skills to problem solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

Overall this applicant is in the top 5% 10% 25% 50% 75% of approximately _____ persons I have taught/supervised over _____ years.

Reviewer's Additional Comments (may be continued on reverse side or in separate enclosed letter):