Reference Evaluation Form MS One Planet Leadership (OPL)

Name of Applicant: _____

TEXAS A& UNIVERSIT

Please note that the information in this reference document will not be shared with the applicant.

Please email, fax or mail this document to: Graduate School Admissions Texas A&M University – Central Texas 1001 Leadership Place Killeen, TX 76549 graduateschool@tamuct.edu FAX# 254-519-5482

How long have you known the applicant? _____ years

In what capacities have you known the applicant (check all that apply):

- _____I supervised the applicant as an employee
- _____I served as the applicant's professor or instructor
- _____I know the applicant as a friend
- _____I have worked with the applicant as a colleague
- ____Other (please specify) _____

Please rate the applicant on the dimensions listed below by checking (or adding an X to) the appropriate box.

	excellent	good	average	low	unknown
ability in written expression					
ability in spoken expression					
curiosity					
creativity					
work ethic					
initiative					
ability to work with others					
communication skills					
passion and dedication					
professionalism					
level of emotional maturity					
ability to receive criticism					
overall intellectual ability					
responsibility and follow-through					
integrity					



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Overall Recommendation (please check one):

TEXAS A&M UNIVERSITY CENTRAL TEXAS

- _____ Admit as a priority. The applicant should be considered a PREMIER candidate.
- _____ Admit. The applicant should be considered a STRONG candidate.
- _____ Admit if space allows. The applicant should be considered a SUITABLE candidate.
- _____ No clear recommendation. The applicant should be considered a RISKY candidate.
- _____ Do not admit. The applicant should NOT be considered a candidate.

Comments

Please enter additional comments and remarks in the space below. Of particular interest to our admissions committee are insights into the applicant's character or history that go beyond the categories above and/or may deserve special consideration.

Signature:	Date:
Printed Name:	
Title/Position:	
Organization:	
Phone number:	
Email:	