

# Western Michigan University

## Graduate Program Reference Form

### To the Applicant :

Complete items A, B and C below, then deliver this form directly to a person who is acquainted with your qualifications for graduate study. You **must** supply this person with a self-addressed, stamped envelope in which he/she will return this form to the Geosciences Department. Refer to departmental materials for application deadline dates. **Be sure to allow plenty of time to gather letters and still meet the deadlines.**

A. Name: \_\_\_\_\_ Degree Sought: \_\_\_\_\_  
Last First Middle Ph.D.  
Masters Degree

B. Fill in the name of the graduate program to which you are applying:

Are you also applying for any of the following? (See enclosed information)

Assistantship Associateship Fellowship

C. The Family Educational Rights and Privacy Act of 1974 provides the student with a right of access to this reference form. This right may be waived, but no school or person can require the student to waive this right. Please check and sign one of the following statements.

I waive my right to review the following evaluation.

I do **not** waive my right to review the following evaluation.

Date \_\_\_\_\_ Name(Print) \_\_\_\_\_  
Applicant's signature \_\_\_\_\_

### To the Person (Referee) Completing This Form:

The student named above has applied for admission to a graduate program at Western Michigan University. Please complete this reference form and return it as soon as possible to the applicant in the self-addressed, stamped envelope which he/she has provided. You may prefer to write a separate letter and attach it to this form.

- (1) (a) How long have you known the applicant?    less than 1 year    more than 1 year
- (b) How well do you know the applicant?    Casually    fairly well    very well
- (c) Has the applicant been    an advisee    in your class(es)    teaching assistant    research assistant
- (d) Have you known this applicant as a professional?    Yes    No

(2) What is your opinion of the applicant's potential as a graduate student? Give views on such matters as his/her accomplishments, intellectual independence, research interests, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly (orally and in writing), teaching ability and experience. If English is not the applicant's first language, please include an assessment of spoken English.

(3) Rate the applicant in comparison to other students or employees whom you have known in a similar capacity. Reference group (e.g. 100 M.A. students I've known in past 5 years, 20 undergraduates in intermediate courses, etc)

|                              | Top 2% | Top 10% | Top 25% | Next 25% | Lower 50% | Unable to judge |
|------------------------------|--------|---------|---------|----------|-----------|-----------------|
| Intellectual ability         |        |         |         |          |           |                 |
| Knowledge of chosen field    |        |         |         |          |           |                 |
| Motivation                   |        |         |         |          |           |                 |
| Research potential           |        |         |         |          |           |                 |
| Teaching potential           |        |         |         |          |           |                 |
| Social skills                |        |         |         |          |           |                 |
| Work habits                  |        |         |         |          |           |                 |
| Originality                  |        |         |         |          |           |                 |
| Problem solving ability      |        |         |         |          |           |                 |
| Oral communication skills    |        |         |         |          |           |                 |
| Written communication skills |        |         |         |          |           |                 |
| Leadership potential         |        |         |         |          |           |                 |

(4) Please indicate the strength of your overall endorsement by placing an X along the scale.

Highly recommended    Recommended    Recommended with reservations    Not recommended

Signature of referee

Date

**Print or type:**

Name

Title

Institution

Address

Telephone

E-mail

*Return this form to the applicant in the self-addressed, stamped envelope he/she has provided. Make sure to sign across the seal of the envelope.*