



Letter of Recommendation Cover Sheet

Student Name: _____

Knowledge of Applicant

- 1.) How long have you known the applicant? ___ Years ___ Months
- 2.) How well do you know the applicant? ___ Very Well ___ Moderately Well ___ Slightly
- 3.) In what capacity do you know the applicant? ___ Instructor ___ Supervisor ___ Colleague
- ___ Academic Advisor ___ Other (Specify): _____

Please rate the applicant compared to his/her peers by placing an X in one column for each ability/trait:

Ability/Trait	Excellent or Outstanding	Above Average	Average or Good	Below Average or Fair	Not Satisfactory	Insufficient Opportunity to Observe
Maturity/Poise						
Dependability/Responsibility						
Moral qualities/Ethical standards						
Initiative, self-reliance						
Persistence						
Leadership						
Ability to work effectively in group						
Ability to work under pressure						
Retention of information						
Analytical ability						
Judgment						
Ability to problem solve						
Aptitude for graduate work						
Creativity						
Oral Communication Skills						
Written Communication Skills						

Your letter should address the following information:

- 1.) What are the applicant's principal areas of strength?
- 2.) What areas require further development?
- 3.) What is your overall evaluation of the applicant's ability for graduate work and potential for becoming responsible and successful in the field?

Evaluator: _____ Position/Title: _____

Evaluator's Employer: _____ Location: _____

Evaluator's Business Number: (____) _____ Email: _____

Evaluator's Signature: _____ Date: _____

Please send this form with the completed letter to the Office of Graduate Admissions and Academic Services
Address: 1678 Asylum Avenue, West Hartford, CT 06117 - **Email:** graduate@usj.edu - **Fax:** 860.231.5744