



Recommendation Form

To the applicant: Please complete the top half of the form and then send it to the recommender for their evaluation.

MBA, MSOL, and MSA

TO BE COMPLETED BY APPLICANT (please print or type clearly)

Applicant's Last Name	First Name	Middle Initial
Intended Program of Study	Semester Start Date	Recommender's Name

I understand that this recommendation is to be used and maintained in confidence by Nichols College.
I hereby waive any and all rights I might have of access to this evaluation under the Family Education Rights and Privacy Act of 1974.

I agree to waive access I do not agree to waive access

Applicant's Signature	Date
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APPLICANT RATING CHART TO BE COMPLETED BY RECOMMENDER (please type or print clearly)

Note to recommender: The person whose name appears above is applying for admission into a graduate program at Nichols College: Master of Business Administration (MBA), Master of Science in Organizational Leadership (MSOL) and Master of Science in Accounting (MSA). These programs are designed to help students develop the necessary business skills required to excel in their careers following completion of their program. Your assessment of the applicant will help our admissions team in their evaluation, supplementing the academic and career information we have received as a part of the application process. We greatly appreciate your time. Please complete the form below and return it to the Division of Graduate & Professional Studies, Nichols College, P.O. Box 5000, Dudley, MA 01571-5000 or you may scan it to Beth Piuze Assistant Director of Recruiting and Admissions at: Beth.Piuze@nichols.edu.

- Please appraise the applicant in terms of the qualities listed below. Rate the applicant in comparison to others' peers in the professional work group.

	Unable to assess	Below Average	Average	Above Average	Excellent
Written Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



	Unable to assess	Below Average	Average	Above Average	Excellent
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethics	<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"/>
Time Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Do you believe that the candidate is prepared academically for the challenges of a graduate program?

a. Yes No Explain.

3. Do you believe that the applicant is prepared emotionally for the challenges a graduate program presents?

a. Yes No Explain.

4. Summary Evaluation. Please indicate your overall recommendation for this applicant.

a. Highly Recommend Recommend with Reservations
 Recommend Do Not Recommend

5. Please provide a written evaluation of the applicant for the Graduate Admissions Committee. Your candid assessment of the applicant's potential for success both academically and professionally would be most helpful to the committee in its selection process. You may use this sheet or attach your evaluation.

Recommender's Signature _____ Date _____

Recommender: Please provide contact information should we require any further information.