

Please send all forms and requested items to: Concordia University Graduate and Adult Admissions Office 1530 Concordia West Irvine, CA 926123203 (949) 8548002, EXT. 1144 (800) 2291200, EXT. 1144 FAX: (949) 854-6725 gradadmission@cui.edu

Applicant: Please complete the first section of this form and provide the form to two people for an academic or professional reference from within the <u>past 5 years</u>. Do not have the form completed by a relative or fellow student who is currently applying to the same program.

PROFESSIONAL OR ACADEMIC REFERENCE

Please type or print legibly. Note: This is not a confidential document.

Applicant's name					Date:					
	Last	First	Middle Initial	(maiden)						
Intended Major		Entry term & year								
To be completed by evaluator:										
Printed name and signature of person completing this form Signature of person completing this form										
What is your relationship to the candidate:										
How long have you known the candidate:										
Contact address: _										
Contact phone:			E	mail:						
Employer Name: _			Your title:							

Rate the candidate in each of the following seven areas by circling the best adjective:

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1. Adaptability	excellent	strong	average	marginal	weak	not observed
2. Communication Skills	excellent	strong	average	marginal	weak	not observed
3. Team Orientation	excellent	strong	average	marginal	weak	not observed
4. Dependability	excellent	strong	average	marginal	weak	not observed
5. Initiative	excellent	strong	average	marginal	weak	not observed
6. Leadership	excellent	strong	average	marginal	weak	not observed
7. Creativity	excellent	strong	average	marginal	weak	not observed

Please provide a narrative appraisal of the candidate's ability to complete a master's level program.

If this person were to apply for a job at your company, would you (re)hire them? Why or why not?

Rate the candidate in each of the following seven areas by circling the best adjective:

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