

**Wright State University**  
**Letter of Recommendation**  
**Applicant in the Department of Human Services**

I. Identifying Information (Applicant)

Name: \_\_\_\_\_  
 UID # \_\_\_\_\_  
 Address: \_\_\_\_\_

II. Identifying Information (Informant)

Name: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 Professional Title: \_\_\_\_\_  
 Prof. Relationship to Applicant: \_\_\_\_\_  
 Years Acquainted with Applicant: \_\_\_\_\_

III. Evaluate the applicant on the following qualities: (1 is low on the scale; 5 is high, 0 signifies no information; N/A indicates not applicable).

1. Initiative	0	1	2	3	4	5	N/A
2. Professionalism	0	1	2	3	4	5	N/A
3. Oral communication	0	1	2	3	4	5	N/A
4. Written communication	0	1	2	3	4	5	N/A
5. Analytical thinking	0	1	2	3	4	5	N/A
6. Creativity	0	1	2	3	4	5	N/A
7. Ability to listen and empathize	0	1	2	3	4	5	N/A
8. Ability to take constructive criticism	0	1	2	3	4	5	N/A
9. Ability to work with people of diverse cultures	0	1	2	3	4	5	N/A
10. Ability to work collaboratively with colleagues	0	1	2	3	4	5	N/A
11. Ability to respect differences	0	1	2	3	4	5	N/A
12. Overall potential for success in graduate school	0	1	2	3	4	5	N/A

IV. Add any information which may clarify above responses or add insight to this applicant's qualifications. (You may add a letter to this form if you wish.)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Return to: Graduate School  
 Wright State University  
 E344 Student Union  
 3640 Col. Glenn Hwy.  
 Dayton, Ohio 45435