



RECOMMENDATION FOR ADMISSION

Pacific Lutheran University Application for Graduate Study

THIS PORTION TO BE COMPLETED BY APPLICANT

Name of Applicant: _____
LAST/SURNAME FIRST/GIVEN MIDDLE

Address: _____
STREET

Address: _____
CITY STATE /PROVINCE ZIP/POSTAL CODE

For admission to (check one): Summer Fall Spring Year: _____

APPLYING FOR:

- Master of Business Administration
- Post MBA – Certificate in Technology and Innovation Management
- Master of Science in Nursing (BSN prepared only)
 - Family Nurse Practitioner
 - Care and Outcomes Manager
- Master of Science in Nursing: Entry-Level Advanced Generalist (Non-Nursing Bachelor’s Degree graduates)
- MSN/MBA Dual Degree (BSN prepared only)
- Master of Arts – Marriage and Family Therapy
- Master of Fine Arts in Creative Writing
- Master of Arts in Education with Residency Certification
 - Elementary Secondary
- Master of Arts in Education/Instructional Leadership for Teachers
- Master of Arts in Education: Principal/Program Administrator Certification
- Principal/Program Administrator Certification only

In compliance with the Family Education Rights and Privacy Act of 1974, effective November 21, 1974, this letter of recommendation, which will be placed in the applicant’s admission file, may be reviewed by the applicant upon request unless this waiver has been signed.

Do you waive the right to be shown information on this form which is to be used for graduate admission purposes only, and hereby declare it to be confidential. Yes No

NAME OF APPLICANT (PRINT)

SIGNATURE OF APPLICANT

DATE

THIS PORTION AND THE REVERSE SIDE TO BE COMPLETED BY RESPONDENT

Name of Respondent: _____ Date: _____

Employer/Organization: _____ Position: _____

Address: _____

Daytime Phone: (_____) _____ E-mail: _____

Signature of Respondent (required): _____

What has been your relationship to the applicant? (Check as many as apply)

- Instructor (undergraduate/graduate) Academic Advisor Employer/Supervisor Other (Specify) _____

As far as you know, do undergraduate grades give an accurate evaluation of the applicant’s academic potential for graduate work?

- No basis for judgment Grades underrate potential Grades correctly reflect potential Grades overrate potential

Please describe the applicant’s performance by checking the appropriate box opposite each characteristic:

	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
Academic knowledge in major field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practical knowledge/skills in major field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to implement new ideas and techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relating to and working with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability for graduate level study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written command of the English language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral command of the English language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contributions as worker and member of society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall ranking of applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please return to: Office of Admission/Graduate, Pacific Lutheran University, Tacoma, Washington 98447

Phone: 253-535-7151 Fax: 253-536-5136

Name of Applicant: _____

Signature of Respondent: _____

Additional comments are helpful in the assessment of the student's qualifications for graduate study. (The space below may be used for additional comments.) If comments are made in a separate letter or are withheld, please return this page with the Recommendation for Admission form.

- I have included additional comments in a separate letter
- I have commented below
- I have chosen not to comment

Thank you for your assistance.

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| <input type="checkbox"/> Post MBA – Certificate in Technology and Innovation Management | <input type="checkbox"/> Master of Fine Arts in Creative Writing |
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DATE

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Name of Respondent: _____ Date: _____

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Daytime Phone: (_____) _____ E-mail: _____

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