



Brandeis University

Graduate School
of Arts and Sciences

MS 031
P.O. Box 9110
Waltham,
Massachusetts 02454-9110
781-736-3410

Letter of Recommendation to Supplement Application for Admission

Applicant

Name of Applicant

Family name

First

Middle initial

Former name, if any

Graduate Program

I waive do not waive my right to read this letter.

Signature of applicant

Date

You may photocopy this form before giving it to your recommender.

Recommender

Please return to the applicant in a sealed envelope signed across the flap. The applicant will submit the application form, in its entirety, to the Graduate School. The Graduate School will also accept letters of recommendation submitted directly to the Graduate School by the referee. The Graduate School will appreciate your opinion of the applicant's ability to undertake advanced

studies and achieve a successful professional career. The basis for your opinion also will be appreciated. A careful discrimination between strong and weak characteristics is in the long run more helpful than routine praise. If possible, please compare this applicant with other students who have recently attended or applied to this Graduate School. If additional space is needed, please attach a separate page.

Please rate the applicant with others you have known who are comparable in age and position.	Upper 1 to 2%	Upper 5%	Upper 10%	Upper 25%	Upper half	Lower half	No basis for judgment
Native intellectual ability							
Breadth of general knowledge							
Oral expression							
Written expression							
Ability to work with others							
Emotional maturity							
Imagination and probable creativity							
Promise as a teacher							
Leadership potential							

Signature

Date

Name printed

Position

Address