



SACRAMENTO STATE

MA TESOL Program

Recommendation for admission

Applicant Name: _____
Last **First** **Middle Initial**

Under the federal Family Education Rights and Privacy Act (FERPA) of 1974, students are entitled to review their records, including letters of recommendation.

- Applicant waives his/her right to review this recommendation.
- Applicant has not waived his/her right to review this recommendation.

Faculty of California State University need only complete Part 1 of this form. All other recommenders should complete both Part 1 and Part 2 of this form.

Recommender Name

Title or Position **Institution or Affiliation**

Address

City **State** **Zip** **Country**

Telephone Number **E-Mail Address**

Part 1 (All recommenders)

Evaluation of Applicant: On the following scale, please rank the applicant against other students in comparable fields.

	<i>Exceptional (highest 1-2%)</i>	<i>Outstanding (highest 5%)</i>	<i>Very Good (highest 10%)</i>	<i>Good (upper 25%)</i>	<i>Average (upper 50%)</i>	<i>Below Average (lower 50%)</i>	<i>Not Applicable</i>
Analytical Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quantitative Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Research Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Command of Field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Best student this year
- Best student in 5 years
- Best student in ___ years
- Not applicable

Part 2 (CSUS faculty exempt)

Letter of Recommendation: In the following field please provide a short letter of recommendation.
No more than 4,200 characters.

Signature of Recommender: _____ Date: _____