

GRADUATE SCHOOL OF BUSINESS
confidential recommendation



To the Applicant:

Please complete the information below and forward this form to the individual you have indicated as a reference on your application for admission.

Degree program (Check only one):

IMBA **MACC** **MBA**

Name of Applicant _____ Social Security Number _____

Home Address _____ Phone () _____

City _____ County _____ State _____ Zip _____

I waive the right under Public Law 93-380 (Family Educational Rights and Privacy Act) to inspect this confidential recommendation when it becomes a part of my admissions file for the Graduate School of Business at Gardner-Webb University.

Signature

Date

To the Evaluator:

The above-named person is applying for admission to the Graduate School of Business at Gardner-Webb University. Please answer the following questions with as much detail as possible, giving careful consideration to the applicant's level of responsibility, maturity, and motivation. This form has been provided for your convenience; if you prefer, however, a letter of recommendation may be substituted in its place. The information requested will be used for the sole purpose of contributing to the graduate admission decision and will be held in utmost confidence. Your assistance in providing this evaluation is very beneficial, and your effort is greatly appreciated. Please mail the completed recommendation form or letter to: **Director of Admissions – Graduate School of Business, Gardner-Webb University, Boiling Springs, North Carolina 28017.**

1. For how long and in what capacity have you known the applicant?

2. What do you consider the applicant's outstanding talents and capabilities?

3. Based on your observations, what are the applicant's primary weaknesses or areas for improvement?

4. Please comment on the applicant's leadership and interpersonal skills.

5. Please discuss your perception of the applicant's potential in a professional environment following the completion of the Graduate School of Business Program.

6. How does this applicant compare to others you have observed:

	Top 5%	Top 15%	Top 30%	Top 50%	Unknown
Academic Promise	_____	_____	_____	_____	_____
Independent Thought	_____	_____	_____	_____	_____
Acceptance of Responsibility	_____	_____	_____	_____	_____
Task Completion	_____	_____	_____	_____	_____
Creativity	_____	_____	_____	_____	_____
Analytical Ability	_____	_____	_____	_____	_____
Interpersonal Skills	_____	_____	_____	_____	_____
Leadership Ability	_____	_____	_____	_____	_____
Written Communication	_____	_____	_____	_____	_____
Oral Communication	_____	_____	_____	_____	_____
Personal Motivation	_____	_____	_____	_____	_____
Career Potential	_____	_____	_____	_____	_____

Based on my knowledge and observations, I (*check one below*) that this applicant be admitted to the Graduate School of Business at Gardner-Webb University.

- strongly recommend
- recommend
- recommend with reservation
- do not recommend

Signature _____ Date _____

Name (print) _____ Phone (_____) _____

Title _____ Company _____

Address _____ E-mail _____

City _____ State _____ Zip _____

Please mail the completed recommendation form or letter to:
Gardner-Webb University
Graduate School of Business
Director of Admissions
Campus Box 5168
Boiling Springs, NC 28017