

# RECOMMENDATION FORM REHABILITATION AND MENTAL HEALTH COUNSELING

## For Admission to Graduate Studies at Montana State University Billings

Under the Family Education Rights and Privacy Act of 1974, the candidate named below will have access to this recommendation unless he/she has waived that right by signing below. If the waiver is signed, this recommendation will be kept confidential from the candidate.

**To the Applicant:** Complete this section and sign. Please Print

Candidate's Name: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Phone: \_\_\_\_\_

I ☐ Waive ☐ Do Not Waive my right to review this letter of recommendation.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To the Writer:** If you wish to use business letterhead for additional remarks, please staple this form to it. If you wish to write a separate letter, please address the following criteria

How long have you known the applicant? \_\_\_\_\_

In what capacity do you know the applicant? \_\_\_\_\_

<i>Please check one rating For each criterion</i>		<i>Outstanding</i>	<i>Above average</i>	<i>Average</i>	<i>Below Average</i>	<i>Unable to rate or N/A</i>
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Originality and intellectual creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Logical thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance toward goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of subject area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborative Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Constructive Approach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Writers Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Return to: Office of Graduate Studies, Montana State University Billings, 1500 University Drive, Billings, MT 59101