CONFIDENTIAL PERSONAL RECOMMENDATION

Applicant's Name _____
(Print or type) First Middle Last

To the Applicant: Fill in your full name above. Request that your Recommender complete this form and return it to you in a sealed envelope which he/she has sealed and signed across the flap, and return the envelope with your Application, or the Recommender can forward the form directly to the Department of Justice Studies, MJA Admissions, at the address shown on the back of this form.

To the Applicant and the Recommender: This Recommendation will be used for admission purposes only and will not be retained in any educational record should the above named Applicant enroll at Methodist College. Consequently, the Recommendation is not subject to the stipulations of the Family Educational Rights and Privacy Act of 1974; under the law the Applicant will not have access to Recommendations.

To the Recommender: Please respond to the following questions. Recommendations are a required part of the Application; so a prompt return is necessary. The MJA program graduate admissions process places a great deal of importance on comments from Recommenders. We appreciate your assistance.

How long have you known the Applicant and in what context?

What are the Applicant's outstanding talents and capabilities?

In what areas do you believe the Applicant needs improvement and growth?

How does this Applicant compare with others you have observed as candidates for an MJA?

Please comment on the Applicant's interpersonal skills.

How do you perceive the Applicant's potential in a professional environment following completion of graduate work?

Please provide your assessment of the Applicant in the following qualities and skills.

	Superior	**Above Average**	**Average**	**Below Average**	**Unable to Judge**
Ability to learn					
Ability to work with others					
Career potential					
Creativity					
Decision-making skills					
Leadership potential					
Logical/analytical ability					
Mathematical ability					
Maturity					
Oral expression					
Personal motivation					
Personal responsibility					
Written expression					

Please provide any additional comments you would like to add. Attach additional sheet if necessary.

☐ Recommend enthusiastically

☐ Recommend with confidence

☐ Recommend

☐ Recommend with reservation

☐ Not recommended

Signature _____ Date _____

Name (print) _____

Title and Department _____

Employer _____

E-mail address _____

Address _____

_____

Telephone _____

Return form to: Methodist University
Dept. of Justice Studies
MJA Program Admissions
5400 Ramsey Street
Fayetteville, NC 28311
USA
ATTN: Kristine Thomas