

FORM K. Doctoral Applicant Evaluation Form

Applicant's Name: _____

In order to encourage the evaluator to provide an objective and candid impression, the applicant is encouraged to sign the following statement. Please be assured, however, that the signing of this statement is optional. Under law, refusal to sign the statement cannot be used negatively in the selection process.

I hereby waive my right of access, under the Family Educational Rights and Privacy Act of 1974, to this letter of recommendation.

Signature: _____ Date: _____

Evaluator: _____

(Print Name)

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

What reference group are you using in these comparisons? _____

For each criterion below, please check the appropriate box.

	Exceptional	Above Average	Average	Below Average	No Information
Intellectual Ability					
Writing Ability					
Speaking Ability					
Academic Preparation					
Motivation					
Maturity					
Leadership Ability					
Classroom Presentation					
Quantitative/Research					