

Prairie View A&M University Graduate Admission Recommendation Form

This form is to be used to recommend a candidate for graduate school at Prairie View A&M University.

Pa	rt I. Applicant I	nformation					
Na	me (Last, First, M	II):					
Ad	ldress (Street/PO	Box, City, Stat	te, Zip):				
En	nail:		Ph	none:			
No	-	ational Rights a	of access to this Gradi and Privacy Act of 197 tions.				
Ι,				, <i>wa</i>	iive the abo	ove right of access	
Pa	rt II. Recommei	nder Informa	tion				
Na	me (Last, First, M	II):					
Ad	ldress:						
En	nployer:		Ti	tle:			
Email:			Phone:				
Pa	rt III. Please con applicant.	_	lowing information	to assist in the	e evaluatio	on of the above	
1.	How long have y	you known the	applicant? Years:	Months:			
2.	Are you familiar him/her?	with the appli Top 10%	cant's academic abil Top 25%	ity? If Top 50%	•	would you rate Lower 50%	
3.	Are you familiar him/her?	with the appli Excellent	cant's job performar Above Average		•	would you rate Below Average	

4. Would you recomme brief statement exp	If yes, please write a									
If your answer was no,	, please write a	ı brief state	ment expla	nining why.						
5. How would you rate the applicant on the following?										
Criteria	Excellent	Good	Fair	Average	Poor	Unable to Rate				
Intellectual Ability						Rate				
Maturity										
Motivation										
Leadership Ability										
Interpersonal Skills										
Oral Skills										
Writing										
Quantitative Skills										
Part IV. Acknowledgement Signature of Recommender: Date:										
Please complete the Recommendation Form completely and mail to: Prairie View A&M University Office of Admission Graduate Admission Processing										

Or submit electronically to: gradadmissions@pvamu.edu

P.O. Box 519, Mail Stop 1009 Prairie View, Texas 77446-1009