

# LETTER OF RECOMMENDATION FORM

## **This Part to be Completed by the Applicant**

Name: \_\_\_\_\_ UID #: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Major Dept.: \_\_\_\_\_ Grant Contact: John A. Mathews

**Applicant Statement:** I understand this letter of evaluation is to be received and maintained in confidence by the University of California, Los Angeles, for grant consideration. I hereby expressly waive any and all rights I might have to access this evaluation under the Family Education Rights and Privacy Act of 1974, the California Information Practices Act of 1977, and any/or all other laws, regulations or policies. I understand that the rights I am waiving include, but are not limited to, the right to inspect and review this letter; the right to have a copy of this letter made for my use; and the right to request an amendment of this letter.

- I agree to waive access to this statement from (Name of Recommender): \_\_\_\_\_  
 I **do not** agree to waive access to this statement from (Name of Recommender): \_\_\_\_\_

Signature of Applicant(s): \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail or give this form to your Recommender**

**RECOMMENDER – Please complete the following and mail this form and your narrative evaluation to the Contact person listed above (John A. Mathews, 3320E Public Policy Building) or return to Applicant in a sealed envelope.**

## **This Part to be Completed by the Recommender**

Please use a separate page to describe the circumstances under which you have come to know about the applicant's academic potential: you may wish to discuss the applicant's unique academic strengths, scholarly publications, success in meeting degree progress timelines, professional accomplishments, and career goals after receiving the degree.

1. **TIME-TO-DEGREE EVALUATION:** Please characterize the degree progress of the applicant compared to others in the same program by placing an "X" on one of the lines.

_____	_____	_____
Ahead of average (Projected time-to-degree one year or more ahead of about 70% of those in program)	Average (Projected time-to-degree is the same as about 70% in program)	Longer than average (Projected time-to-degree will extend for one year or longer than about 70% in program)

2. **OVERALL RECOMMENDATION:** Please indicate the strength of your overall endorsement of this applicant by placing an "X" on one of the lines.

Truly Exceptional (Top 1%)	Excellent (Top 5%)	Very Good (Top 10%)	Good (Top 25%)	Average (Top 50%)	Below Average (Lower 50%)
_____	_____	_____	_____	_____	_____
1	2	3	4	5	6

3. **COMPLETION:** Based on your judgment, please indicate the likelihood this applicant will complete their thesis within the award year by placing an "X" on one of the lines.

Absolutely Certain (100%)	Almost Certain (80%+)	Strong Possibility (60%+)	Possible But Not Likely (40%+)	Not Very Likely (0% - 39%)
_____	_____	_____	_____	_____
1	2	3	4	5

Recommender's Name (Please print) \_\_\_\_\_ Position or Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_