

## Recommendation Form: Master of Arts in Teaching

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Applicant, please print or type the following information:

Applicant Name \_\_\_\_\_ Applicant Email \_\_\_\_\_

Name of Evaluator \_\_\_\_\_ Evaluator's Email Address \_\_\_\_\_

Evaluator Position/Institution \_\_\_\_\_

I waive my right to review or access letters and statements of recommendation written on my behalf.  Yes  No

Signature \_\_\_\_\_

Evaluation Type:  Academic/Professional  Experience with Children/Youth

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### To the Evaluator:

Directions: Complete the following prompt and return the completed document one of the following ways: 1) email as a saved .pdf to [gradschl@up.edu](mailto:gradschl@up.edu), 2) mail a printed document to the address above, or 3) upload your document via SENDedu. All recommendations must be signed and submitted by the recommender to be considered valid. (Please send/upload a separate letter if you need more room to provide your recommendation.)

***Based on your direct observation of the applicant (as an academic instructor/professional supervisor or in relation to the applicant's experience with children/youth), please evaluate the applicant's preparation, intelligence, originality, research skills, and other pertinent qualities.***

Summary Rating:  Excellent  Above Average  Average  Below Average  Poor

Name of Evaluator\* \_\_\_\_\_ Date \_\_\_\_\_

*\* If you are submitting this form electronically, printed name serves as your signature.*

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