

CURRICULUM AND INSTRUCTION GRADUATE PROGRAMS
Department of Learning, Teaching, & Curriculum
University of Missouri-Columbia

Name of applicant (please print) _____

TO THE APPLICANT:

Please supply this form to someone who can speak authoritatively of your academic ability and/or professional promise. If you are willing for the response to be considered confidential, please sign the statement below.

The Department of Learning, Teaching, & Curriculum of the University of Missouri has my permission to treat this reference as confidential.

(Signed) _____

TO THE RESPONDENT:

If the statement above is signed, the information given in this letter will be considered confidential. We are particularly interested in the applicant's qualifications for graduate study, including academic aptitude, potential experience and potential ability to communicate orally and in writing, motivation and reliability. Will you write below, and on the reverse side if necessary, your opinion of this applicant's ability and promise. You may also attach a letter, if you prefer.

Among approximately _____ persons I have worked with in recent years who have had about the same amount of experience and training, I would rank this applicant in (check one) _____ the upper 10%; _____ the upper 25%; _____ the upper 50%; _____ the lower 50%.

Date _____ Signature _____ Position _____

Institution _____ Address _____

Please return this form to: Curriculum and Instruction Graduate Studies
Director of Graduate Studies
303 Townsend Hall
Columbia, MO 65211