## CCU Online MBA Application for Admission

## Confidential Recommendation Form

Min Mr. Dr. Last (Sumame-Family Name) First Name Middle Initial Social Security Number Street Address:  City, State, Zip Code, Country.  Telephone: Fax:	Applicant Name:			,		NACHARA CONTRA	0.110
City, State, Zip Code, Country:  Telephone:  Fax:  E-Mail:  Applicant's signature  Ecommender Name:  May we contact you to ask further questions about the applicant?  Recommender's Title:  Recommender's Title:  Recommender's Company;  Street Address:  City, State, Zip Code, Country:  Telephone:  F-Mail:  Please complete questions 2-7 on your company or personal letterhead. Questions 1, 8 and 9 should be completed on this Recommendation Form The Admission Committee would appreciate your responses to the questions below in a specific, detailed and candid manner, noting in particular, incidents that illustrate the applicant's maturity, intellectual capacity, and initiative. You may choose to address questions 2-7 in a letter format ratt than as separate topics. Thank you  1. How long have you known the applicant?  Years:  Months:  1. How long have you known the applicant's most outstanding talents or characteristics? Please include specific observations of the candidate's qua and qualifative skills.  4. In what areas does the applicant's most outstanding talents or characteristics? Please include specific observations of the candidate's qua and qualifative skills.  7. Do you feel graduate study is appropriate for the applicant septicant at this time? Why?  8. How would you evaluate the applicant in comparison to other graduate school candidates you have known? Please consider the following qualities to Observe Maturity  Managerial potential  Namagination/creativity  Managerial potential  Managination/creativity  Managerial potential  Managination/creativity  Communication skills			· · · · · · · · · · · · · · · · · · ·	•			Social Security Number
Telephone: Fax: E-Maik:  #I waive my right to view this completed document.  ### Applicant's signature  ### Applicant's signature  ### Applicant's signature  ### May we contact you to ask further questions about the applicant? ### No  ### Recommender's Title:  ### Recommender's Company:  ### Street Address:  City, State, Zip Code, Country: F-Maik:  ### Please complete questions 2-7 on your company or personal letterhead. Questions 1, 8 and 9 should be completed on this Recommendation Form The Admission Committee would appreciate your responses to the questions below in a specific, detailed and candid manner, noting in particular, incidents that illustrate the applicant's maturity, intellectual capacity, and initiative. You may choose to address questions 2-7 in a letter format rath than as separate topics. Thank you  1. How long have you known the applicant? Years: Months:  2. Under what circumstances have you known the applicant?  3. What do you consider the applicant's most outstanding talents or characteristics? Please include specific observations of the candidate's qua and qualitative skills.  4. In what areas does the applicant require further professional development?  5. What da areas does the applicant's leadership ability have you witnessed?  6. How would you evaluate the applicant's communication skills? Please give examples of both written and spoken communication skills.  7. Do you feel graduate study is appropriate for the applicant at this time? Why?  8. How would you rate the applicant in comparison to other graduate school candidates you have known? Please consider the following qualities and professional development?  #### Superior Excellent Above Average Top 50% Below Average Insufficient apportunity to work with others  #### Address							
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