## LETTER OF RECOMMENDATION

Applicant: Complete this selection							
Applicant's Name:							
Current Address :							
	this confidential recommendation of the Act of 1974, this waiver is opt	on. I understand that, according to the Family tional.					
Signa		Date					
Directions to the recommend	er:						
University of Kansas. You h qualifications for graduate v purpose of assessing the app for financial assistance. You statement above. Please encl	ave been selected by the applications work in business. The information licant's qualifications for admission comments will be held completed one this form in the envelope address it to the candidate for submitted.	duate studies in the School of Business at the ant to submit your comments on the applicant's on supplied on this form will be used for the ssion and, if requested and funds are available, tely confidential if the applicant has signed the dressed to the applicant, sign your name across mission with the remainder of the application					
1. How long have you known	the applicant?	months					
2. Under what circumstances	years have you known the applicant?	mondis					
3. What are the applicant's p	rimary strengths?						
	rimary weaknesses or liabilities?	? How might these affect the applicant's agement?					

5. From your knowledge of the career? What is the basis for the career?			sess his/her po	otential for a m	anagement	
6. Please complete the rating	grid by evaluati	ing the applicant	in relation to	other candida	tes you have	
known in a similar capacit		0 11			·	
	Exceptional	Outstanding	Above	Average	Below	No Basis
	Upper 5%	Upper 10%	Average Upper 1/3	Middle 1/3	Average Lower 1/3	For Judgment
Conceptual ability			• •			
Analytical ability						
Ability to work with others						
Initiative						
Maturity						
Effectiveness in speaking						
Effectiveness in writing						
I would (check one)				that the applicant be admitted to a graduate reservations program at the University of Kansas		
Name (type or print)						
Title						
College/organization						
Business address			Signature			
City, state, zip code			Date			
Phone						