

Graduate Programs in Computer Science and Software Engineering

Recommendation Form

To the Applicant Complete the following items and forward this form to the individual who will provide your reference.				
· ·		,		
Applicant's Name	FIRST	MIDDLE	FORMER/OTHER (IF APPLICABLE)	
Address				
	NUMBER AND STR	REET		
CITY	STATE AND COUN	TRY	ZIP/POSTAL CODE	
Social Security Number		Applicat	ion Date	
Program				
☐ Master of Science in Computer Scien	nce			
Master of Science in Software Engine	· ·			
☐ Master's Plus in Computing and Sof	tware Engineering			
			connection with investigating and evaluating th concerning my qualifications in connection	
Applicant's Signature			Date	
College in Maryland. The Admission Convolute about confidentiality: Under Public Law records unless and until they enroll at Loyola Control this form for the purpose of admission only. The	ommittee finds candid evalu v 93-380, the Family Education. College in Maryland. To ensure co e professional reference and any or	nations helpful in cho al Rights and Privacy Act onfidentiality of informat ther subjective supplement	Science and Software Engineering at Loyola osing from among highly qualified candidates applicants for admission do not have access to their tion within the spirit of the law, the college will use eary statements sent on the applicant's behalf, will be	
destroyed before his/her matriculation at Loyola reaching a decision in his/her best interest.	a. Your comments are valuable. T	The appraisal of the appli	cant will greatly assist the Admission Committee in	
it. Sign your name across the sealed flap of th single package. The deadline for student s	ne envelope and return it to submission of application ma	the student who will sterials to the Computer	pages in an envelope with your letterhead on submit all of his/her application materials in a er Science and Software Engineering Program Session. Please keep these deadlines in mind	
Name				
Title/Position				
Company/Position				
Address				
	NUMBER AND STE	REET		
СПУ	STATE AND COUN	TRY	ZIP/POSTAL CODE	
Telephone	E-r	nail Address		

Background Information For how long and in what capacities have you known the applicant?		
Reference		
Please add any comments that may assist in providing a complete	picture of the applicant's abilities and potential as a graduate student.	
Signature	Date	