



ST. THOMAS AQUINAS COLLEGE

Office Of Admissions and Financial Aid
125 Route 340, Sparkill, New York 10976-1050 (845) 398-4100

RECOMMENDATION FORM

<p>Applicant's Name</p> <p>Name _____</p> <p>Address _____</p> <p>_____</p> <p>Social Security # _____</p> <p>Check one: <input type="checkbox"/> I do <input type="checkbox"/> I do not waive my right to see this reference recommendation.</p> <p>Signature _____</p>	<p>Recommender's Name</p> <p>Name _____</p> <p>Position _____</p> <p>Organization _____</p> <p>Note: The person whose name appears on this form has applied for admission to a Master's Program in Business Administration. We would appreciate it if you would supply the following information in as much detail as possible.</p>
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1. How long and in what capacity have you known the candidate?

2. What do you consider the candidate's most outstanding strengths or characteristics?

3. What are the candidate's chief weaknesses?

4. In your opinion, how well has the candidate considered and prepared for the decision to enter a Master's Program in Business Administration?

5. I rank the candidate in terms of her/his standing in **academics/job performance** (circle one or both).

	Outstanding Top 10%	Above Average Next 20%	Average Next 40%	Below Average Lowest 30%
Academic Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breadth of General Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work effectively with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to initiate ideas and actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. I recommend this candidate for Graduate Study in Business Administration as follows:

- Strongly Recommend Recommend with reservation
 Recommend Do not recommend

Signature: _____ Date: _____

Please mail this form directly to:
Office of Admissions
St. Thomas Aquinas College
125 Route 340
Sparkill, NY 10976-1050

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