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*2x2 ID Picture*

*OU Form 2*

# RECOMMENDATION FOR ADMISSION

The application of the student for admission shall be acted upon only after this form and other required documents shall have been submitted.

# THE APPLICANT:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  |  |  |
|  | *Family Name* | *First Name* | *Middle Name* |

# ADMISSION REQUEST:

1. Degree Sought Master in Community Development (MCD)

 Master in Community Health Development (MCHD)

 Master in Cooperative Management (MCM)

 Master in Development Communication (MDC)

 Master in Human Resource Management (MHRM)

 Master in Alternative Learning System (MALS)

 Master in Urban Management (MUM)

 Master of Arts in English as a Second Language by Research (MAESL)

 Doctor of Philosophy in Language Education by Research

1. Semester for which admission is sought:

 First Second Semester, School Year 20\_\_ to 20\_\_

# THE RECOMMENDING PROFESSOR/EMPLOYER:

Your recommendation will be considered confidential. Please return this form directly to the above address.

1. How long have you known the applicant and in what capacity?

|  |  |  |
| --- | --- | --- |
|  as professor |  semester |  years |
|  as research adviser |  semester |  years |
|  Others (please specify\_\_\_\_ \_\_\_\_\_) |  semester |  years |

1. Please describe the applicant’s potential to pursue graduate study with minimal supervision.
2. Please rate the applicant on each characteristic in comparison with other students with approximately the same experience and training.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Characteristics** | **Upper 2%** | **Upper 5%** | **Upper 10%** | **Upper 25%** | **Upper 50%** | **Lower 50%** | **No basis for judgment** |
| Intellectual capacity |  |  |  |  |  |  |  |
| Desire to achieve ambition |  |  |  |  |  |  |  |
| Potential for success in major field |  |  |  |  |  |  |  |
| Emotional maturity |  |  |  |  |  |  |  |
| Enthusiasm |  |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |  |
| Resourcefulness |  |  |  |  |  |  |  |
| Responsibility |  |  |  |  |  |  |  |
| Carefulness in work |  |  |  |  |  |  |  |
| Originality/ingenuity |  |  |  |  |  |  |  |
| Ability to work with others |  |  |  |  |  |  |  |
| Ability to adjust in new situations |  |  |  |  |  |  |  |
| Leadership qualities |  |  |  |  |  |  |  |
| Written expression skills |  |  |  |  |  |  |  |
| Oral expression skills |  |  |  |  |  |  |  |

1. Please indicate additional information concerning the applicant’s potential as a graduate student that may not be reflected in the transcript of records. Please use additional sheet if necessary.
2. Please indicate the strength of your overall endorsement and your expectation of the performance of the applicant for graduate study.

 Outstanding *(upper 5%)*

 Above average *(upper 15%)*

 Satisfactory *(upper 50%)*

 Satisfactory with some reservations

 Marginal

 Unsatisfactory

|  |
| --- |
|  |
| *Signature over Printed Name* |
|  |
| *Date* |
|  |
| *Position/Designation* |
| *Contact Number* |
|  |
| *Email* |

Thank you for completing the recommendation.