



Recommendation for Admission

Master of Arts in English Language and Literature Program

Applicant

INSTRUCTIONS: Letters should be from people who are familiar with your work in academic or professional contexts, rather than personal ones, and who can comment on your critical thinking skills, your ability to undertake independent projects, and your capacity for collaborating with colleagues. You must provide all information requested in this top section. This information will be used to ensure that this recommendation will be matched to your application file. The completed recommendation and any

attached information (if applicable) must be sent to the **University of Michigan-Flint, Office of Graduate Programs, 251 Thompson Library, Flint, MI 48502-1950.**

Name of Applicant _____	Name of Recommender _____
Birthdate _____	Title _____
Telephone _____	Institution/Company _____
E-mail _____	Business Address _____
Program of Study: ENGLISH LANGUAGE AND LITERATURE	Business Telephone _____
	E-mail _____

Under the provisions of the Family Educational Rights and Privacy Act of 1974, you (if admitted and enrolled) will have access to the information provided unless you have waived such access. Please sign and date below to inform us of your decision.

I hereby **(check one)** **waive** OR **do not waive** my right of access to the information recorded below.

Signature of applicant _____ **Date** _____

Recommender

INSTRUCTIONS: Under the provisions of the Family Education Rights and Privacy Act of 1974, this applicant (if admitted and enrolled) will have access to the information provided unless he/she has waived such access.

In addition to responding to the items below, please comment on the following:

- critical thinking skills
- ability to work independently
- capacity for collaboration
- strengths and limitations for advanced graduate study
- specific actions, accomplishments, or personal qualities that support your assessment of the applicant

Several paragraphs will be more useful to the admission committee than one or two sentences. Please use the back side of this form for your comments or attach a letter. If you do not wish to use this form, please include the full name of the applicant as it appears above to ensure that your recommendation will be added to the correct applicant file.

1. How long and in what capacity have you known the applicant? _____
2. Please rate the applicant in comparison with others whom you have known at similar stages in their careers.

	Exceptional Upper 5%	Outstanding Next 15%	Very Good Next 15%	Good Next 15%	Next 50%	No Basis for Judgment
Knowledge in chosen field						
Motivation and perseverance toward goals						
Ability to work independently						
Ability to express thoughts in speech and writing						
Ability/potential for teaching						
Ability to plan and conduct research						
Ability to exchange and share ideas						
Ability to analyze and solve problems effectively						
Interpersonal skills						
Leadership potential						
Integrity						

3. Please indicate the strength of your overall endorsement by placing an "X" along the scale.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Recommended	Recommended	Recommended with Some Reservations	Not Recommended

Name (please print) _____

Signature _____ **Date** _____