



LETTER OF RECOMMENDATION

You may submit this form by mail, by fax or electronically by e-mail. (See contact information below.) The signed letter may also be enclosed in a sealed envelope, signed on the back by the author, and submitted along with the other application documents.

The Ph.D. Program
The George Warren Brown School of Social Work
Campus Box 1196, One Brookings Drive, St. Louis, MO 63130-4899
Phone: (314) 935-6605 FAX: (314) 935-8511 e-mail: phdsw@wustl.edu

To be completed by the applicant :

Applicant's name: (Last or Family) (First) (Middle)

Name of person writing the reference:

(Please Print or Type Name Here) (Title)

Please tell us how you know each other:

To be read by applicant and recommender:

Under the Family Educational Rights and Privacy Act of 1974, students enrolling at Washington University have access to their admission records, including letters of recommendation. However, students may waive their right to see letters of recommendation, whereupon such letters will be held in confidence. If the applicant has not signed a waiver, it is assumed that this letter is submitted with the recommender's understanding that the applicant, once registered at Washington University, may request to see the letter. The alternative selected will not affect consideration of the applicant for admission.

If you wish to waive your right to examine this letter of recommendation, please sign here:

Signature of Applicant Date

To be completed by the recommender:

If you wish, you may submit your recommendation in the form of a letter, written on a separate piece of paper. If you do not feel you know the student well enough to give him or her a recommendation, please check here: []

1.) Summary Evaluation: Overall scholarly ability. In comparison with students in the same field who have had approximately the same amount of experience and education, how do you rate the applicant in SCHOLARLY ABILITY:

- Truly Exceptional (Best student in many years, highest 1%.)
Outstanding (Comparable to the best student in current class, highest 5%.)
Very Good (Next highest 15%.)
Good (Ability easily identifiable, in upper 30.)
Average (Upper 50%.)
Below Average

2.) If this student applied to do doctoral work with you would you:

- Accept enthusiastically Not accept
Accept with some reservation Other:

3.) Some gifted individuals compile mediocre scholastic records. In your opinion, is the applicant's scholastic record, as you know it, an accurate index of his or her scholastic ability?

_____ Yes;

_____ No;

_____ Don't know

If you answered "No," please explain briefly:

4.) What is your estimate of the applicant's promise as a graduate student? (Give views on such matters as previous scholarly accomplishments, intellectual independence, capacity for analytical thinking, capacity for research and publication, ability to work with others, ability to organize and express ideas clearly, drive and motivation.) You may write this information on a separate piece of paper, if you prefer.

Signature: _____ Date: _____

Institution: _____

Address: _____

Telephone Number: _____ E-mail: _____