

**CHICAGO STATE UNIVERSITY
PSYCHOLOGY DEPARTMENT
Graduate Admissions Recommendation Form**

Instructions: Applicant should complete the information in Section A. The professional who is completing the recommendation form should complete the rest of the form and attach additional pages, if necessary, to give any information relevant to the applicant's appropriateness as a graduate student in counseling. After completion, the form should be placed into a sealed envelope. The person completing the recommendation should sign the flap of the envelope and return the envelope to the student.

All completed recommendations should be submitted with the application by the designated deadline.

SECTION A: *To be completed by applicant*

1. APPLICANT: _____ ID# _____
2. ADDRESS: _____
_____ PHONE: _____
3. APPLYING TO: School Track _____ Clinical Mental Health Track _____
4. DEADLINE FOR SUBMITTING APPLICATION: _____, 20 _____
5. APPLICANT: Please check the option of your choice and sign and date this form before submitting to your reference.

_____ I wish to have access to this letter of recommendation; it will not be confidential and will be incorporated into my file for the purpose of seeking admission to CSU.

_____ I waive my rights of access to this letter of recommendation and request that it be incorporated into my file for the purpose of seeking admission to CSU.

Applicant's
Signature: _____ Date: _____

SECTION B: *To be completed by professional making the recommendation*

Name: _____ Title: _____

Place of Employment: _____

How long have you known the applicant? _____

What is your relationship to the applicant? _____

How well do you know this applicant: 1 (very well) 2 (somewhat) 3 (slightly)

Please rate the applicant's behavior on each of the following dimensions compared to individuals at a similar level of education and experience. Circle the appropriate rating.

	<u>Excellent</u>	<u>Good</u>	<u>Average</u>	<u>Poor</u>	<u>Very Poor</u>	<u>N/O*</u>
a. Ethical Behavior	5	4	3	2	1	N
b. Emotional Maturity	5	4	3	2	1	N
c. Personal Stability	5	4	3	2	1	N
d. Ability for Scholarly Work	5	4	3	2	1	N
e. Writing	5	4	3	2	1	N
f. Verbal Skills	5	4	3	2	1	N
g. Initiative	5	4	3	2	1	N
h. Perseverance	5	4	3	2	1	N

*N/O = NO opportunity to observe

Describe the basis for any low ratings (Attach extra sheet, if necessary)

What is your opinion of the applicant's ability to success in graduate school and perform as a counselor upon graduation? Include specific, concrete examples of the applicant's strengths and weaknesses including any reservations you may have about the applicant's ability to perform in graduate school.

SIGNATURE: _____

DATE: _____