

## GSL — Recommendation for Graduate School Admission



**Instructions for the applicant.** Use this form when a potential recommender lacks access to the online recommendation form through your application for admission. Please complete the section above the dashed line, then forward this form to the recommender for completion. Also, note the waiver below.

### RECOMMENDATION ON BEHALF OF

Name \_\_\_\_\_  
*Last*
*First*
*Middle*

NR# (international students) \_\_\_\_\_ Email \_\_\_\_\_

Proposed major \_\_\_\_\_ Degree sought \_\_\_\_\_

### APPLICANT'S WAIVER OF RIGHT OF ACCESS TO CONFIDENTIAL STATEMENT

Under the Family Educational Rights and Privacy Act of 1974, a student enrolled at Clemson University has access to his or her educational records. We comply with this law, while still allowing the student the option of waiving the right of access. If you wish to waive the right to examine this recommendation, please sign. If left unsigned, you will have access to this document upon enrollment at Clemson University. The alternative you choose in no way affects our consideration of your application.

I hereby freely and voluntarily waive my right to any information contained on this recommendation form submitted by:

\_\_\_\_\_  
*Name of recommender; provided by applicant*

\_\_\_\_\_  
*Signature of applicant*
*Date*



**Instructions for the recommender.** This form may be completed using Acrobat Reader or by hand as a printed copy. To use the digital signature and electronic submission features, save this PDF file to your device and open it in Acrobat Reader, rather than working within a web browser.

### TO THE RECOMMENDER

Because of federal legislation giving students access to educational records, the Clemson University Graduate School cannot guarantee the confidentiality of your statement unless the applicant has signed the waiver printed above.

#### 1. Knowledge of the Applicant

Approximately how long have you known the applicant? \_\_\_\_\_ years

How well do you feel you know the applicant?  Casually  Well  Very well

What was the nature of your contact with the applicant?

Teacher in one class  Teacher in more than one class  Supervisor  Research advisor

Major advisor  Other (specify) \_\_\_\_\_

2. Rating of the applicant. Please rate the applicant in the areas indicated.

		Truly exceptional (top 5%)	Outstanding (Top 10%)	Very strong (top 25%)	Average (top 50%)	Below average (50% and below)	Unable to rate/not applicable
1	Knowledge in area of proposed study						
2	Ability to grasp new concepts						
3	Originality, intellectual creativity						
4	Demonstrates professional curiosity						
5	Written communication						
6	Oral communication						
7	Ability to work collaboratively						
8	Ability to analyze problems/formulate solutions						
9	Planning and organizational skills						
10	Attention to detail						
11	Perseverance toward goals						
12	Self-motivation						
13	Ethics and integrity						
14	Ability to manage stressful situations						
15	Laboratory skills (if applicable)						
16	Mathematical and logical thought (if applicable)						
17	Potential as a researcher (if applicable)						
18	Potential as a teacher (if applicable)						

3. Which two of the above characteristics would you say best describe the applicant? Please elaborate on your ratings.

4. Please share your perspective on the suitability of the applicant for graduate study in the indicated program.

5. Please provide your most compelling reason for Clemson University to admit this applicant, and explain your reasoning.

6. Do you have any additional information related to the applicant's character or abilities that you think the admissions committee should consider when reviewing the applicant?

7. Summary

- Recommend enthusiastically
- Recommend with confidence
- Recommend
- Recommend with reservation
- Not recommended

Your signature \_\_\_\_\_

Printed name \_\_\_\_\_

Title \_\_\_\_\_

Position \_\_\_\_\_

Department \_\_\_\_\_

Organization \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Country \_\_\_\_\_ Zip code \_\_\_\_\_

Date \_\_\_\_\_

**Recommender:** please return this form directly to the Graduate School.

*This form allows digital signatures and may be submitted via email by clicking this link: [grdapp@clemson.edu](mailto:grdapp@clemson.edu)*

If you prefer, send as a hardcopy via regular mail to **Graduate Admissions  
E-209 Martin Hall  
Clemson University  
Clemson, SC 29634-5713**