



LETTER OF RECOMMENDATION

Name of Candidate _____
Last First Middle

Note to Candidate: Letters of recommendation should be completed by current or former professors. If these are impossible to obtain, letters from work, supervisors, or others who can objectively evaluate your ability to perform graduate-level work will be acceptable. Letters from relatives, friends, colleagues, therapists, or other social acquaintances are not considered. It is important that the letters address the questions outlined in the Letter of Recommendation form.

I authorize the release of a candid evaluation to assist in the admission process. I understand that the material will be kept confidential both from me and the public, and I waive any right of access that I might have by law. I also understand that this becomes the property of the Department of Graduate Studies in Counseling and is not returnable. I further understand that Rollins College and the Department of Graduate Studies do not require that I execute this waiver and is willing to review my application without such a waiver.

Date _____ Signature _____

Or

I authorize the release of a candid evaluation to assist in the admission process and do not waive my right to examine the recommendation should I enroll as a student in the Rollins College Department of Graduate Studies in Education.

Date _____ Signature _____

To the individual completing this form:

The person whose name appears above has applied for admission to a Master of Arts in Counseling Program at Rollins College. These programs are designed for responsible and responsive adults who have elected to prepare for careers as professional counselors. The objective of these programs is to provide students with experiences which will extend their competencies as persons and as professionals engaged in helping relationships. These programs are challenging and therefore will require strong academic skills as well as considerable dedication on the part of the student. The Admissions Committee requests that the reference respond to the questions below in as specific and candid a manor as possible, particularly noting maturity, purposefulness, initiative, and potential for success.

Name of the individual completing this form _____

Position/Title Organization _____

Address _____

City/St/Zip _____ Telephone Number _____

E-mail Address _____

How long, and under what circumstances, have you known the applicant? What do you consider the applicant's most outstanding talents or characteristics?

Are you aware of any limitations on the part of the candidate that would hinder performance as a graduate student or counselor? If so, please describe.

In what ways has the individual demonstrated vitality and commitment to personal development?

In your opinion, how well qualified is this candidate for intellectually challenging graduate study?

Please provide any further insights that you believe may be helpful to the Admissions Committee.

I recommend this applicant for admission to the Master of Arts in Counseling Degree Program at Rollins College.

- I am willing to stake my credibility that this student will be a distinctly outstanding graduate student.
- I am enthusiastic in my endorsement of this person and strongly believe that s(he) will be above average as a graduate student.
- I expect the applicant to perform graduate work satisfactorily, but s(he) may be average or even below average in some respects.
- More so than the average student, this person will need strong mentoring or s(he) may not be successful as a graduate student.
- I believe that the applicant would not perform graduate work satisfactorily.

Date _____ Signature _____

Please return this appraisal to the candidate in a sealed envelope or mail directly to:

Graduate Studies in Counseling
Rollins College
203 East Lyman Avenue
Winter Park, FL 32789

Questions or concerns should be directed to the Coordinator, Graduate Studies in Counseling
Phone: 407-646-1568
Fax: 407-975-6430

**NO ACTION CAN BE TAKEN ON THIS STUDENT'S APPLICATION UNTIL
THIS RECOMMENDATION IS RETURNED.**

If possible, please attach your business card or letterhead.