Request for Recommendation to the McCoy Graduate School of Business

TO THE APPLICANT: Two letters of recommendation are required components of your application. Your authors may write a free-form letter (on company/university letterhead, for example) or they may use this form. If using this form, it is recommended that you print this document and provide it to your recommender along with an addressed, stamped envelope. The return address on the envelope you provide should be that of the Texas State Graduate College, which can be found on the second page of this form. Please complete your personal information and preferred program (everything above the dotted line) before giving this form to your recommender. You should also consider whether you wish to waive your rights to view the recommendation material being provided. Be mindful of the application deadline and be sure to give your recommender adequate time to complete this form. Please print clearly.

Applicant Name: ____________________________________________________________

Graduate program to which you are applying: □ MBA □ MAcy □ MSAIT □ MSHRM

Optional Waiver: I hereby waive my right of access to all recommendation documents that are being provided by (print name of recommender) ____________________________ in connection with my application for admission to the McCoy Graduate School of Business.

Applicant Signature: ______________________________________________________

TO THE RECOMMENDER: The person named above is applying for admission to a graduate program within the McCoy College of Business Administration. Letters of recommendation are an important component of our admissions process. Your recommendation will be used in the admission committee’s evaluation of the applicant. Your comments will be held in strict confidence if the applicant has signed the above waiver.

Knowledge of the Applicant: How long have you known the applicant? _________ years ________ months

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

What was the nature of your interaction with the applicant?
□ Teacher in one class □ Teacher in more than one class □ Supervisor □ Academic Advisor
□ Other (please specify) ______________________________________________________

Relative Rating of the Applicant: It is most helpful if you can rate the applicant relative to some reference group such as college seniors, graduate students, or others. Your reference group is: ________________________________

For the Areas of Evaluation listed in the table below, please indicate your opinion of this applicant:

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<thead>
<tr>
<th>Area of Evaluation</th>
<th>No Knowledge</th>
<th>Exceptional</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>Poor</th>
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<tbody>
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<td>Intellectual Ability</td>
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<td>Motivation</td>
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<td>Oral Communication</td>
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<td>Maturity</td>
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<td>Working with others</td>
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Please express your views on any of the items contained in the previous table, and on any other relevant abilities of the applicant about which you have knowledge:

Do you have any information related to character and temperament, or any concerns, which should be considered by the admissions committee or should be taken into account in planning the student’s graduate work?

Overall recommendation based on your opinion of the applicant’s ability to pursue graduate study (please check only one):

☐ Strongly Recommend  ☐ Recommend  ☐ Recommend with Reservation  ☐ Do Not Recommend

If you would like to submit an additional letter in addition to this recommendation form, feel free to do so. Please include this form (and optional letter) in the envelope that was provided to you by the applicant. If you received this form electronically and/or were not provided an envelope, please send to:

Texas State University  
Graduate College  
JC Kellam 280  
601 University Drive  
San Marcos, TX 78666-4684

We ask that you place your signature across the sealed flap of the envelope. Thank you for your time and input!

Signature of Recommender: ___________________________  Date: ______________________
Name: ___________________________  Organization: ___________________________  Title: ___________________________
Address: ___________________________  Email: ___________________________  Phone: ___________________________