



| LETTER OF EVALUATION | | | |
|---|--|--|----------------|
| (To be completed by applicant) | | | |
| Name (print or type) | _____ | _____ | _____ |
| | Last | First | Middle Initial |
| Degree Program: | _____ Management | _____ Environmental Science and Policy | |
| | _____ Applied Leadership for Teaching and Learning | | |
| <p>Under the Family Educational Rights and Privacy Act of 1974, students enrolled at the University of Wisconsin-Green Bay have access to their educational records, including letters of evaluation. However, students may waive their right to see letters of evaluation, in which case the letters will be held in confidence. If the applicant has not signed a waiver, he or she may request to see the letter after enrolling in the Graduate School. If you wish to waive your right to examine this evaluation, please sign here:</p> | | | |
| _____ | | _____ | |
| Signature of Applicant | | Date | |

To be completed by the Evaluator:

Please complete the following questions and chart. A written statement or letter elaborating on the applicant's preparation, characteristics and potential would also be valuable to our evaluation.

1. How long have you known the applicant and in what capacity?
2. If you are/were the applicant's supervisor on a job, how would you rate his/her performance?
3. If you are an instructor was the applicant enrolled in any of your classes? What classes were they?
4. Is the applicant's academic potential greater or less than that indicated by his/her grades? Insert an X where appropriate below. (If his/her grades do not reflect the applicant's true potential, please explain briefly in item 6.)
_____much less _____somewhat less _____equal _____somewhat greater
_____much greater _____no basis for judgement
5. Please check the educational level of the representative group with whom the applicant is compared:
_____college juniors _____college seniors _____1st year graduate student _____Advanced graduate student
_____experienced teachers

6. Please rate the applicant on each characteristic in comparison with other students/educators you have known with approximately the same amount of experience and training.

| Characteristic: | Top 10% | Top 25% | Top 50% | Lower 50% | Unable to rate |
|-----------------------------------|------------|------------|------------|--------------|-------------------|
| Knowledge in subject area | | | | | |
| Intellectual capacity | | | | | |
| Originality, creativity | | | | | |
| Mathematical ability | | | | | |
| Logical/analytical ability | | | | | |
| Written English expression skills | | | | | |
| Oral English expression skills | | | | | |
| Laboratory Skills (if applicable) | | | | | |
| Maturity | | | | | |
| Potential as a teacher | | | | | |
| Potential in research | | | | | |
| Ability to work with others | | | | | |
| Potential as a leader | | | | | |

7. Please indicate any other information concerning the applicant's potential as a graduate student that may not be reflected in the applicant's transcripts and/or test scores. If the applicant's native language is not English, please evaluate English proficiency. Attach a sheet if necessary.

Recommendation for Admission:

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

Signature: _____

Name (print): _____

Title & Dept: _____

Institution: _____

Address: _____

Date: _____

Return this evaluation to:

**Office of Graduate Studies, WH 304
University of Wisconsin-Green Bay
2420 Nicolet Drive
Green Bay, WI 54311-7001**