

LETTER OF EVALUATION

Master of Public Administration

<u>Instructions for Submittal</u>

Applicants must fill out the first two sections of this form, save, and send to each evaluator. Each evaluator must fill out remaining sections and <u>send directly</u> to the Office of Graduate Studies, <u>gradstu@uwgb.edu</u> or Office of Graduate Studies, <u>2420 Nicolet Drive</u>, Green Bay, WI 54311-7001.

APPLICANT	SECTION:							
First Name		Middle Name		Last Name				
PRIVACY AC	T STATEMENT:							
access to their evaluation, in w	educational records, includ which case the letters will be fter a final decision is made	ling letters of evaluation held in confidence. If e on admission. The stu	on. However, stud the applicant has	the University of Wisconsin-Green Bay have ents may waive their right to see letters of not signed a waiver, he or she may request to indicated below:				
I WAIVE MY R	RIGHTS TO EXAMINE TH	IS LETTER						
Applicant's Electronic Signature			Date (mm/dd/yyyy)					
Typhicalit s Ele-								
EVALUATOR The applicant re Green Bay. The completing this	eferenced above is seeking a information you share wit form. Please fill out the surve	h us will be valuable ir y entirely and send this fo	n making an admis orm to the Office of O	tration program at the University of Wisconsinsion decision. We appreciate your effort in Graduate Studies, gradstu@uwgb.edu or 2420 Nicolet dies at gradstu@uwgb.edu.				
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Comparing the applicant to other individuals in the same field with approximately the same amount of experience and training, please indicate your evaluation of this applicant's ability and professional competence by marking the appropriate ranking:

	Top 10%	Top 25%	Top 50%	Lower 50%	Lower 25%	Unable to Rate
Problem Solving Capacity	0	0	0	0	0	0
Oral Communication Ability	0	0	0	0	0	0
Written Communication Ability	0	0	0	0	0	0
Critical Thinking	0	0	0	0	0	0
Ethical/Moral Capacity	0	0	0	0	0	0
Sensitivity to Needs and Feelings of Others and their Community	0	0	0	0	0	0
Ability to Respect Differences	0	0	0	0	0	0

Potential as a Leader	0	0	0	0	0	0
Maturity and Professionalism	0	0	0	0	0	0
Ability to Work Collaboratively	0	0	0	0	0	0
Integrity	0	0	0	0	0	0
Please include how long you have kno improvement related to potential succ	wn the applican	t and in what ca	apacity; assess t	he applicant's st	rengths and are	as of
information you feel the admission pa	ess in a graduat nel should knov	e program in pi v.	iblic administra	ition; as well as	provide any oth	er reievant
(Limit 3000 Characters)						
RECOMMENDATION FOR ADM	MISSION:					
O Recommend Highly						
O Recommend						
O Recommend with Reservations O Not Recommended						
Evaluator's Electronic Signature		Da	ite (mm/dd/yyy	v)		
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