

CONFIDENTIAL ACADEMIC RECOMMENDATION

MASTER OF EDUCATION

FLEX-TIME

Ар	olicant : Please co	omplete this sec	tion before prese	enting to refere	ee					
	ne of Applicant:									
Surna			First		Middle		Student # or C	UAC Ref. #		
Rei			ur appraisal of the will be considered		ant for a Maste	r's degree in	the field of Edu	ication. The		
1.	How long have you	known the app	licant? (MM/YY)							
2.	In what capacity?			From:		to				
3.		your evaluation	of this applicant	with respect to	with respect to their ability to complete a graduate program in the					
			Excellent	Very Good	Good	Fair	Poor	No Basis for Comment		
	Intellectual Capacity									
	Scholarly Potential									
	Originality									
	Critical Judgment									
	Oral Expression									
	Written Expression									
	Initiative									
	Work Habits									
	Perseverance									
ŀ.	In comparison with	other students a	at the applicant's	level, indicate	where you wou	uld place this	applicant.			
	Among the top	□ 5%	□10%	□ 25%	□ 50%		lower than 50	%		
5.	Please attach a cur their ability to succe A comprehensive le	ed at the Maste	ers level. This lett	er will be use	d for admission	purposes and				
This signa	e Referee: Recommendation is ature over the seal. ments directly to th	You can either	return the envel	ope to the ap	plicant to subn	nit with their	application of	r email the		
Nam	e:			Institu	ution:					
Faculty:			Addre	ess:						
Posit	ion:									
Signa	ature:			Date:						

Telephone Number:

Email address:

Protection of Privacy: Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs". Additionally, personal information may be used by University staff in many offices on a "need to know" basis to identify and contact students who require their services.



CONFIDENTIAL PROFESSIONAL RECOMMENDATION

to

MASTER OF EDUCATION

FLEX-TIME

A	oplic	ant:	Please com	plete th	nis section	before	presenting	to referee

Nama	~f	100	linanti	
Name	UI.	ADDI	ican.	

Namo or Approant.							
Surname	First	Middle	Student # or OUAC Ref. #				

Referee: We would appreciate your appraisal of the above applicant for a Master's degree in the field of Education. The information in the report will be considered confidential.

From:

1. Professional Relationship to applicant

2. Period of relationship upon which assessment is based

3. Indicate with an 'X' your evaluation of this applicant in comparison with others performing similar duties.

		Excellent	Very Good	Good	Fair	Poor	No Basis for Comment
Professional Knowledge and Ability							
Leadership Qualities							
Teaching Ability							
Professional Relationships with	Colleagues						
	Students						
	Public						
Oral Expression							
Written Expression							
Reliability of Performance							
Familiarity with Current Theory & Prac	tice						

4. 11	in compansion with others performing similar professional duties, now would you rank this applicant.					
A	mong the top	□ 5%	□10%	□ 25%	□ 50%	\Box lower than 50%

5. Please attach a current letter of reference which speaks to the candidate's strengths, or any concerns you may have with their ability to succeed at the Masters level. This letter will be used for admission purposes and scholarship consideration. A comprehensive letter will be most beneficial in determining the applicant's eligibility.

To the Referee:

This Recommendation is confidential. Please enclose this form and supporting letter in a sealed envelope and write your signature over the seal. You can either return the envelope to the applicant to submit with their application or email the documents directly to the Admissions Office, sent from your professional email account to <u>admissions@nipissingu.ca</u>.

Name:	Company/School/ Organization:	
Position:	Address:	
Signature:	Date:	
Telephone Number:	Email address:	

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