

## **Graduate Study Programs | Official Recommendation**

## School of Arts and Sciences School of Professional Studies

## To the Applicant:

Please print or type the following information before delivering this form to the individual who will be writing your recommendation. Each recommendation should be sealed in an envelope and sent directly by the person giving the recommendation to the specific department to which you are applying. Name:\_\_\_ Middle Please indicate the degree and program for which you are applying: Education M.Ed. History M.A Theology ☐ M.A. in Biblical Studies ☐ Administration ☐ American History ☐ Modern European History ☐ Counseling: ☐ Higher Ed. ☐ School ☐ M.A. in Theology ☐ Literacy ☐ Master of Theological Studies (M.T.S.) ☐ Secondary Education (PACT) Mathematics M.A. ☐ Special Education: ☐ Cert. ☐ Non-Cert. ☐ Teaching Mathematics ☐ Urban Teaching To be read by the Applicant and the Recommender: Under the Family Educational Rights and Privacy Act (FERPA) of 1974, students enrolled at Providence College have access to their admission records, including letters of recommendation. However, students may waive their right to see letters of recommendation, whereupon such letters will be held in confidence. If the applicant has not signed a waiver, it is assumed that this letter is submitted with the recommender's understanding that the applicant may request to see the letter. The alternative selected will not affect consideration of the applicant for admission. ☐ I have retained my right of access to this recommendation. □ I have waived my right of access to this recommendation. Date: Signature of Applicant: To the Recommender: Please comment on the following topics (in a separate letter) when discussing the applicant's potential for success at the graduate level: Intellectual potential Maturity Interpersonal Skills Ability to do independent work Experience in Urban Classrooms\* Motivation for graduate study Ability in oral & written expression Leadership \* Urban Teaching Applicants Only Please print or type:

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E-mail:

Please send this form and your recommendation letter to:

Name of Recommender:

Street

(Name of Graduate Program)
(Graduate Department address – see next column)
Providence College
One Cunningham Square
Providence, RI 02918-0001

Address: \_\_

Telephone: (

Graduate Department addresses:

Date:

Zip

Education – Harkins 217 History – Ruane 137 Mathematics – Howley 218 PACT – Harkins 206 Theology – Siena 202

State

Revised: August 2015