



## **II. Recommender:**

The above named person is applying for admission to a Master of Education program at the University of Illinois at Chicago. You have been selected by the applicant to submit your comments on the applicant's qualifications.

The information supplied on this form will be used to assess the applicant's qualifications for admission. Under the provisions of the Family Educational and Privacy Act of 1974, this applicant (if admitted and enrolled) will have access to your comments unless he/she has waived such access. **Please attach a typewritten letter with specific comments** on the applicant's strengths and limitations for graduate study. Descriptions of significant actions, accomplishments, and personal qualities related to scholarly achievement are particularly helpful. Several paragraphs will be more useful to the admission committee than one or two sentences. You may send the cover letter and the letter of recommendation to the applicant or send it directly to the College of Education at the address below. In either situation, please make sure the envelope is sealed and that you have signed it across the seal. If you have any questions or need further information, you may contact the Student Services Office at (312) 996-4536.

Thank you for your cooperation and assistance.

**M.Ed. Admissions Committee  
Office of Student Services Room 3145 EPASW  
College of Education (m/c 147)  
University of Illinois at Chicago  
1040 West Harrison  
Chicago, Illinois 60607-7133**

### **Some questions/situations to consider when writing your recommendation:**

1. Under what circumstances have you known the applicant?
2. How long have you known the applicant?
3. What do you consider the applicant's primary strengths and weaknesses and how do you feel these will affect the applicant's performance in graduate study?
4. How do you feel the applicant's primary strengths and weaknesses will contribute to the applicant's intended career in the education field?

**Name**(Please type): \_\_\_\_\_ **Position:** \_\_\_\_\_

**Institution:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_