GRADUATE PROGRAM REFERENCE FORM

Name of applicant ____________________________________________________________

The Family Educational Rights and Privacy Act of 1974 opens many student records for the student’s inspection. The law also permits the student to sign a waiver relinquishing his rights to inspect letters of recommendation. The applicant’s signature below constitutes a waiver; no signature means the student will have the right to read this reference.

DATE _______________________ SIGNATURE ____________________________________________________________

The person whose name appears above is applying for admission to a degree program in the Department of Public Policy. The purpose of this program is to provide an opportunity to develop knowledge, abilities, attitudes, and understandings that will constitute a foundation for their growth into competent and responsible managers. It would be of assistance to the Public Policy Admissions Committee if you would give us your assessment of the applicant. Please comment briefly on the points listed below, which suggests the kind of information the committee finds useful. This form is provided for your convenience only. We would welcome your comments in whatever format you think suitable.

1. Length of time you have known the applicant and in what capacity: ______________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________

2. Applicant’s talents or strengths: ______________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________

3. Applicant’s weaknesses: ______________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________

4. Applicant’s ability in written expression: ______________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________

5. Applicant’s ability in oral expression: ______________________________________________________
   ___________________________________________________________________________________________________________
   ___________________________________________________________________________________________________________
Please give us your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison with others applying for graduate school whom you have known.

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<th>Unusually Outstanding (Top 2%)</th>
<th>Superior (Top 5%)</th>
<th>Excellent (Top 15%)</th>
<th>Good (Top Third)</th>
<th>Average (Middle Third)</th>
<th>Poor (Bottom Third)</th>
<th>(Not Observed)</th>
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</thead>
<tbody>
<tr>
<td>Work Experience Related to Public Management</td>
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<td>Personal Motivation</td>
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<td>Potential for Growth</td>
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<td>Analytical Ability</td>
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<td>Facility with English</td>
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Name (please print or type) __________________________________________________ Date ____________

Position or Title ____________________________________________________________

Name of Organization ________________________________________________________

Address _________________________________________________________________

Signature ________________________________________________________________