

Letter of Recommendation with Ranking Grid

Name of Student:.....Department:.....

NOTE: You may attach additional pages of text if necessary.

	No basis for judgment	Below Average	Average	Good	Excellent Top 10%	Outstanding Top 2%
Intellectual potential						
Ability to analyze/problem solve						
Creativity and imagination						
Communication skills: oral						
Communication skills: written						
Ability to work with others						
Maturity						
Motivation for advanced study						
Overall Promise						

Signature _____ Date _____

Name _____

Function _____

Phone _____

E-mail _____