

## **Request for Recommendation**

The applicant should complete this section and also provide the respondent with a stamped envelope addressed as follows: Ed.D. in Educational Leadership Program \* Dallas Baptist University \* 3000 Mountain Creek Parkway \* Dallas, TX 75211-9299

N EDUCATIONAL

\_\_\_\_ is applying for admission to the Ed.D. in Educational (Mr.) (Mrs.) (Miss) (Ms.) (Dr.) (Rev.) Leadership K-12 Program at Dallas Baptist University. The applicant and the admissions committee would appreciate you completing this form and returning it at your earliest convenience to the Ed.D. in Educational Leadership K-12 Program.

Applicant's Statement: I am aware that under the Family Educational Rights and Privacy Act of 1974 (20 U.S.C. Sec. 1232 {a} {1} {C}, I am not required to, but I may voluntarily waive my right to access confidential letters and statements of recommendation submitted to Dallas Baptist University in support of my application for graduate admission. I further understand that under the Family Educational Rights and Privacy Act, an unsuccessful applicant, regardless of whether such applicant has signed a waiver, has no right to inspect any of that applicant's application materials. The giving of a waiver shall not be regarded as a condition for admission to, receipt of financial aid from, or receipt of any other services or benefits from the University. I understand that this recommendation will be used in the process of evaluating my application for admission to the Ed.D. in Educational Leadership K-12 Program of Dallas Baptist University.

I hereby: 🗆 do / 🗆 do not waive my rights of access to any and all letters or statements of recommendation which may be submitted by

(Applicant must specify name of person submitting recommendation before sending form to that person) in connection with my application to the Ed.D. K-12 Program of Dallas Baptist University.

Signature

\_\_\_\_ Social Security # \_\_\_\_

## KNOWLEDGE OF THE APPLICANT

1.	How long have you known the applicant? years months			
2.	In what capacity? (please check)	<ul> <li>Teacher in more than one class</li> <li>Research Advisor</li> </ul>	<ul> <li>Minister</li> <li>Other (specify):</li> </ul>	

3. How well do you know the applicant? □ Well □ Very Well

Date

## RELATIVE RATING OF THE APPLICANT

Please rate the applicant in the areas indicated below by comparing him or her to a reference group you specify (Master's degree class, employees, church membership category, etc.)

Reference Group :

- Of those in the group, in intellectual ability, I consider the applicant to be in the (please check): 1.
  - □ Upper 1% □ Upper 10% □ Middle 50% □ Upper 5% Upper 25% □ Inadequate opportunity to observe applicant
- Applicant's potential as an Ed.D. student: (*Please rate by one of the indicated numeric values.*) 2

	Exceptional (10-9)	Above Average (8-7)	Average (6-4)	Below Average (3-2)	Unable to Answer
Knowledge of His/Her Field					
Intellectual Ability for Doctoral Work					
Task Completion					
Motivation to Work					
Writing Ability					
Oral Expression					
Emotional Maturity					
Ability to Work Well with Others					
Originality and Creativity					
Ethical Behavior					
Analytical Ability					
Spiritual Vitality and Maturity					
Social Acceptance					
Awareness of the Needs of Others					

3. Some individuals demonstrate comparatively low achievement scholastic records. In your opinion, is the applicant's record, as you know it, an accurate index of his or her scholastic ability? □ Yes □ No □ Inadequate knowledge of applicant's scholastic record

If your answer is "no," please explain briefly.

- 4. Do you have any information related to character or temperament that would affect the student's ability to do doctoral work, which should be considered by the Ed.D. K-12 Admissions Committee?
- 5. Please express your views on any item(s) mentioned above and on any other relevant abilities the applicant may possess (e.g. ability to organize and express ideas clearly, orally and in writing, the potential for critical thinking, argument construction, and other academic competencies).

6.	I recommend this applicant for admission to the Ed.D. in Educational Leadership K-12 Program of Dallas Baptist University (please check one)					
	u ,	□ Probably doctoral level	□ Some reservations for doctoral level	□ I do not recommend for doctoral level		

Comments:	
Signature of respondent	_ Date
Name (printed or typed)	_ Title
Institution	_ Phone
Address (City, State, ZIP)	