

**Department of French and Italian
University of Pittsburgh
1328 Cathedral of Learning
Pittsburgh, PA 15260**

RECOMMENDATION FORM

TO THE APPLICANT: FILL OUT THIS SECTION AND SIGN YOUR NAME

(Name of Applicant) _____ is applying for admission to the _____ (MA/PhD) program in the _____ (department) at the University of Pittsburgh. We would appreciate your views concerning the applicant's suitability for graduate study in this field, and future potential as a scholar and teacher.

The 'Family Rights and Privacy Act of 1974' provides the applicants have the right of access to reference letters written after January 1, 1975 unless they choose to give up that right. Prior to submitting this form to a reference writer, the applicant must indicate whether they wish to be able to see the letter. **IMPORTANT**, letters received which do not have the following choice indicated and signed by the applicant will be considered 'non-confidential' and will be available to be reviewed by the applicant.

I DO _____ DO NOT _____ give up the right of access to this reference letter.

Applicant's signature _____

TO THE REFEREE: COMPLETE THIS SECTION AND ATTACH YOUR LETTER OF RECOMMENDATION

I rank this student in the top _____ % of approximately _____ students I have taught in _____ years.

	Top 10%	Top 25%	Top 50%	No basis for Judging
INTELLECTUAL ABILITY	_____	_____	_____	_____
GENERAL KNOWLEDGE	_____	_____	_____	_____
ORAL EXPRESSION	_____	_____	_____	_____
WRITING ABILITY	_____	_____	_____	_____
PERSERVERANCE	_____	_____	_____	_____
EMOTIONAL MATURITY	_____	_____	_____	_____
POTENTIAL FOR RESEARCH	_____	_____	_____	_____
POTENTIAL AS TEACHER	_____	_____	_____	_____

SIGNATURE

NAME (TYPED OR PRINTED)

DATE

POSITION

INSTITUTION

ADDRESS

CITY

STATE

ZIP CODE

