

ATTENTION:

To Be Completed by the Applicant

Complete the section below. If your recommender will not be submitting this recommendation online, send this form to him/her with a self-addressed business envelope.

Please note that the Zicklin School reserves the right to verify all information contained anywhere in this application package.

Applicant's Name Mr. Ms. _____
 First (Given) Name Middle Name Last Name/Family Name/Surname

Applicant's Date of Birth _____
 mm/dd/yyyy

Applying for: 2017 2018 Program: _____

Under the Family Educational Rights and Privacy Act of 1974, you have the right to review official College student records once you enroll. The act further stipulates that you may waive your right to see recommendations for admission. Please indicate whether you wish to waive this right by checking the appropriate box below. *Your choice will in no way affect the decision on your application.*

I waive my right of access to this recommendation. I do not waive my right of access to this recommendation.

Signature of Applicant _____ Date _____

To the Recommender Completing This Form:

The above person is applying for admission to the Zicklin School of Business at Baruch College. Your appraisal of the applicant is an important part of the admissions process.

- In your comments, please discuss:
 - the applicant's interpersonal skills. *Does the applicant work well in groups and assume leadership roles?*
 - the applicant's day-to-day responsibilities. *Does the applicant take initiative and perform well under pressure?*
 - your assessment of the applicant's overall ability to be a manager.
 - how you feel the applicant will contribute to the Zicklin community.
- Note that the applicant has been given the option to waive his/her access to this recommendation (see above).
- If you are not submitting this recommendation online, please submit all written recommendations on **official letterhead** and **attach your business card** to this form. After you have completed this form, seal it in an envelope and sign your name over the seal. Return this sealed envelope to the applicant, who will return the sealed envelope with other application documents to the Zicklin School of Business.

Use the chart below to rate the applicant relative to other individuals you have known in the same circumstances in recent years.

	Exceptional (Top 5%)	Outstanding (Top 15%)	Above Average (Top Third)	Average (Middle Third)	Below Average (Bottom Third)	Unable to Assess
Intellectual Ability						
Analytical Ability						
Written Communication in English						
Oral Communication in English						
Leadership Potential						
Organizational Skills						
Ability to Work with Others						
Initiative						
Motivation						
Maturity						
Integrity						

1. How long have you known the applicant? _____

2. In what capacity? _____

3. What is your overall assessment of the applicant's aptitude for graduate study?

- Strongly recommend Recommend with reservations
 Recommend Do not recommend

4. Please indicate your assessment of the applicant's potential to be an effective manager.

- Well above average Below average
 Above average Well below average
 Average

5. Additional Comments (optional)

In the space below or on **official letterhead** if you prefer, please provide any additional comments you believe might be helpful to the Admissions Committee in making its decision.

Signature of Recommender _____ Date _____

Name (type or print) _____

Title _____

Firm/Institution _____

Address _____
Number, Street, Apartment

City _____ State _____ Zip Code _____ Country _____

Business E-mail _____ Business Telephone _____