

UNIVERSITY OF CENTRAL ARKANSAS
DEPARTMENT OF SPEECH-LANGUAGE PATHOLOGY
201 Donaghey Ave. P.O. Box 4985
Conway, AR 72035-0001

Name of Applicant

Last Name, First Name

DOB~Month/Day (no year)

The family Education 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/her rights to inspect letters of recommendation. The applicant's signature below constitutes a waiver signifying that the recommendation will stay **CONFIDENTIAL**; no signature means the student will have the right to read this reference. Your signature also allows the Admission Committee to contact your references.

Signature

Date

The person whose name appears above has applied for admission to the M.S. degree program in Speech-Language Pathology at the University of Central Arkansas. We would appreciate your assistance by answering the following questions. Please give this form to the applicant in a sealed envelope and sign across the flap.

<p>For each of the following abilities/traits, rate the applicant in comparison to his/her peers.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"></th> <th style="text-align: center;"><u>Excellent</u></th> <th style="text-align: center;"><u>Average</u></th> <th style="text-align: center;"><u>Poor</u></th> </tr> </thead> <tbody> <tr> <td>Academic Ability</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Oral Communication</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Written Communication</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Able to Work With Others</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Motivation</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Responsibility</td> <td style="text-align: center;">5</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> </tbody> </table> <p>Rank in Class: _____ (e.g., 5th in class)</p> <p>Overall, how would you rate this applicant's potential to complete a graduate program in speech-language pathology? <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor</p> <p>Would this candidate likely be accepted for admission to your graduate program? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable <input type="checkbox"/> Don't Know</p>		<u>Excellent</u>	<u>Average</u>	<u>Poor</u>	Academic Ability	5	4	3	2	1	Oral Communication	5	4	3	2	1	Written Communication	5	4	3	2	1	Able to Work With Others	5	4	3	2	1	Motivation	5	4	3	2	1	Responsibility	5	4	3	2	1	<p>Would you recommend this candidate for a graduate assistantship? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please provide any additional comments below (or on the reverse side, if necessary).</p>
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Motivation	5	4	3	2	1																																				
Responsibility	5	4	3	2	1																																				

Name and Title (please print)

Date

Institution

Signature

Email

Telephone Number