

LETTER OF RECOMMENDATION

Applicant Name: _____ Last First Middle

DEPARTMENT OF ELECTRICAL AND COMPUTER ENGINEERING MICHIGAN STATE UNIVERSITY

To Applicant:

The Family Education and Privacy Act of 1974 gives students the right to inspect letters of recommendation written in support of applications for admission or fellowship. This law also permits students to waive that right if they so choose, although such a waiver cannot be a condition of admission or award. If you wish to waive your right to examine this letter of recommendation please sign the waiver below.

The following signed statement indicates the wish of the applicant regarding this recommendation.

I do waive _____ I do not waive _____ my right of access to the information in this recommendation

Signed _____ Date _____

To Recommender:

A. Please rate this applicant in overall promise for graduate work.

Table with 8 columns: BELOW AVERAGE, AVERAGE, SOMEWHAT ABOVE AVERAGE, GOOD, EXCELLENT, OUTSTANDING, TRULY EXCEPTIONAL, INADEQUATE OPPORTUNITY TO OBSERVE. Includes numerical scales for each category.

B. The applicant's actual (if available) or approximate rank in his/her class is _____ out of _____ students.

C. How long have you known the applicant and in what capacity?

D. Please write additional comments about the applicant's capacity for serious scholarship and research. (Please use the back of this form or an attached page.)

Signature _____ Date _____

Name (print) _____ Position _____

Institution _____ Email _____

Address _____

Return to: Dept. of Electrical & Computer Engineering Attn: ECE Graduate Application Processing Michigan State University 2120 Engineering Building East Lansing, MI 48824-1226