



ELMS COLLEGE
GRADUATE RECOMMENDATION FORM

To the applicant: Enter your full name and title of the recommender. Give an envelope to the recommender, and have him/her mail the form to:
Donna Harvey at Elms College, School of Graduate and Professional Studies, 291 Springfield Street, Chicopee, Massachusetts 01013-2839

Programs

Please choose one

- Master of Science in Applied Behavior Analysis
Master of Arts in Social Communication and ASD
Certificate of Advanced Graduate Study in Autism Spectrum Disorders
Certificate in Asperger's Studies
Master of Science in Autism Spectrum Disorders
Master of Arts in Autism Science Disorders
Behavior Analyst Certification Board (BACB) course sequency only
Certificate of Advanced Graduate Study in Social Communication and ASD

Section 1 (to be completed by applicant):

The following information must correspond exactly to the information submitted on your application. Indicate your decision regarding waiver of the right to access to this reference before giving it to the person who will be submitting the recommendation.

Student name Last (Family name) First Middle Other last names

Semester/Year of desired entry

The Family Education Rights and Privacy Act of 1974 and its amendments guarantee students access to their records. Students, however, are entitled to waive their right of access concerning recommendations. The following signed statement is the applicant's wish regarding this recommendation.

- I waive my right to inspect the contents of this recommendation.
I do not waive my right to inspect the contents of this recommendation.

Signature Date Signature Date

Print name of the person providing reference

To the recommender: The person named above is applying for admission to one of the above programs at Elms College, and has requested that your evaluation be included as part of the information on which the admissions committee will base its decision. Candidates must be able to fulfill the intellectual requirements of graduate study and possess personal qualifications essential to professional performance. We would appreciate your prompt, and candid evaluation.

1. How long have you known the applicant? In what capacity?

2. We would appreciate your written comments on this applicant. They will be carefully considered by the admissions committee and will play a key role in our evaluation. Please describe the talents, strengths, and areas of needed improvement for the applicant as they could relate to graduate study. Please supply a narrative as a separate attachment.

3. Personal and professional appraisal

Please place an X in the box that most accurately describes this candidate.

Characteristics	Superior (Upper 5%)	Above Average (Upper 10%)	Average (Upper 25%)	Below Average (Upper 50%)	Insufficient Information
Intellectual ability					
Leadership ability					
Competence in professional practice					
Personal motivation/initiative					
Ability to work with others					
Flexibility					
Ability to work independently					
Written communication skills					
Oral communication skills					
Interpersonal skills					
Analytical ability and problem-solving skills					

4. Recommendation for graduate study:

- Strongly recommend
 Recommend
 Recommend with reservations (noted above)
 Do not recommend (noted above)

Among the _____ number of students I have taught in the past _____ years, this student ranks in the _____%.

Please type or print:

Your Name _____

Title _____

Organization _____

Address _____
Number and Street

_____ *City* _____ *State* _____ *Zip*

E-mail _____

Date ____/____/____ Signature _____

Instructions for returning recommendation.

Please mail this recommendation to:
 Donna Harvey
Elms College
 School of Graduate and Professional Studies
 291 Springfield Street
 Chicopee, MA 01013

