



LOYOLA
UNIVERSITY
NEW ORLEANS

COLLEGE OF BUSINESS

MBA RECOMMENDATION FORM

Name of Applicant _____
Please print or type.

OPTIONAL

I agree that this recommendation will remain confidential, and I knowingly and freely waive my right to review it.

Applicant signature _____ Date _____

To the recommender: The person named above is applying for admission to the MBA program and your candid evaluation will provide important information needed to make an admission decision. **NOTE:** The information given in this recommendation will be confidential ONLY if the above waiver has been signed by the student. Please answer the questions below in terms of the applicant's motivation and potential to succeed in a graduate program. If you wish, you may attach written comments to this sheet. When finished, give your recommendation form to the applicant in a sealed envelope with your signature across the flap.

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

- Less than one year Two to four years Student
 One to two years More than four years Employee, supervised

Please evaluate the applicant in the following areas.

AREAS	EXCELLENT	GOOD	AVERAGE	WEAK	UNKNOWN
Writing Skills					
Speaking Skills					
Initiative					
Determination					
Integrity					
Enthusiasm					
Teamwork					
Leadership					

What is your overall assessment of the ability of the applicant to complete a graduate degree?

- Excellent Good Average Poor

Recommender's name _____

Position/title _____

Company or institution _____

Address _____

City _____ State _____ Zip _____ Country _____

Recommender's signature _____