

Creative Writing Graduate Program Recommendation Form

	,	y applicant:					
ame:			First Name		Middle Initial		
ne Family Educatio	n Rights and Privacy	Act of 1974 grants to t	he student the right to	o waive his/her access	rights to certain educati	onal records. If the rig	
-		_	_		will be kept confidentia		
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□ do □ do no	ot waive my right to a	access to the Okianom	a City University Grad	uate Program applican	t recommendation form.		
udent Signature: _				Date:			
his section to	be completed by	y reference:					
					cant for admission. If yo lication, so a prompt ret		
ame of reference:							
rganization and Tit	le:						
ow long have you	known the applicant?	·					
what capacity? _							
none:		Email Ado	dress:				
Please rate the applicant:	Outstanding Highest 5%	Very Good Highest 10%	Good Upper 25%	Average Upper 50%	Below Average Lower 50%	Unable to Judge	
Intellectual Potential							
Goal Orientation							
Professional Integrity							
Motivation for Proposed Program							
		1					

1	Please describe applicant's self-discipline (ability to be a self-starter).
2	Please describe applicant's ability to take criticism and follow guidance.
3	Please describe applicant's ability to work with others.
4	Please describe applicant's ability to plan for and meet deadlines.
Sig	nature Date
	ahoma City University employs, advances, admits, and treats in it employment and educational programs, all persons without regards to their race, colo ional or ethnic origin, sex, age, religion or status as a veteran.

Mail Completed Form To:

Oklahoma City University Office of Graduate Admissions 2501 N. Blackwelder Ave. Oklahoma City, OK 73106-1493

Fax: (405) 208-5916 Email: gadmissions@okcu.edu