

# Teacher Education Program Recommendation for Admission

## Applicant

Please type or print in ink.

Name last first middle former names

Permanent home address street city state zip

Mailing address (if different from above)

Phone Fax E-mail

Name of reference

Title Organization

**Applicant's access waiver: Please note that the following waiver is not required as a condition of admission or for receipt of financial aid or any other services and benefits from the Lewis & Clark Graduate School of Education and Counseling.**

I waive my right, provided by the Family Educational Rights and Privacy Act of 1974 (the Buckley Amendment), to examine this letter.

Applicant signature Date

## Recommendation Writer

Please attach your recommendation written on letterhead.

*This recommendation may be included in an internship or practicum placement application.*

You have been asked to serve as a reference for an applicant to the Teacher Education Program at the Lewis & Clark Graduate School of Education and Counseling. We seek information about the candidate's academic potential, talent with young people, and enthusiasm and concern for teaching as a profession. We appreciate your candid appraisal of the applicant's personal qualities and professional promise. Please be objective, frank, and specific regarding both the strengths and the limitations of the candidate. (Please note that the applicant may see your letter unless he or she has signed the above waiver.) Thank you for your help.

Please rate your level of recommendation:  strongly recommend  recommend  recommend with reservations  do not recommend

Yes  No If additional information regarding this candidate is desired, would you be willing to be contacted by phone?

Reference's name Phone

Title Organization

Address street city state zip

Signature Date

**Please mail this recommendation form with a letter of recommendation to the Office of Admissions at the address below.**