

INSTRUCTIONS: The recommendation should be from individuals who are familiar with the applicant's academic or professional abilities (i.e. skills, intellectual problem solving skills, character). Relatives may not submit recommendations.

DIRECTIONS TO THE APPLICANT: Complete the *Application Identifying Information & Recommendation Waiver* section, and give it to an individual who has agreed to serve as a reference.

Applicant Identifying Information

Last Name			First Name
Address			Primary Phone(###-###-####)
City	State	Zip Code	Email Address
			Program Applying to

Recommendation Waiver

Do you wish to waive your right to examine this recommendation? Yes No

Please Note: If you waive your right to examine this recommendation, this form can only be submitted by the recommender

Under the Family Educational Rights and Privacy Act of 1974, students have access to their education record, including recommendations. However, students may waive their right to view these recommendations, in which case they will be held in confidence.

Applicant Signature: _____ Date: _____

Recommender Information

Last Name			First Name
Email Address			Primary Phone(###-###-####)

How long have you known the applicant?

_____/_____
 Years Months

In what capacity do you know the applicant?

 Professionally / Academically

Recommender - Company / Organization Information

Company / Organization			Position / Title
Address	City	State	Zip Code

Recommender Signature: _____ Date: _____

NOTE: Digital signature is acceptable if the form is submitted from the recommender's email address that the applicant listed on their application.

Please submit the complete form directly to apply@umassglobal.edu

This form must be accompanied by the **Letter of Recommendation**.