



GRADUATE BUSINESS PROGRAMS - RECOMMENDATION LETTER COVER SHEET

John Carroll University thanks you for taking the time to assist in the process of evaluating this applicant for admission to our graduate business program. Recommendations that supply relevant information about an applicant not disclosed by college transcripts, test scores, and scholastic evaluations are most helpful. Please type or print all information requested on this form. Letters and covers sheets must be submitted directly from the recommender.

TO BE COMPLETED BY THE APPLICANT	
Name:	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> Last First Middle Initial </div>
Email:	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> Phone: </div>
Graduate Business Program: _____	
<p>Important-Confidentiality: Federal law enables you to have access to this recommendation in the future. An applicant may waive this right but cannot be required to do so by a school or person. If, in spite of the existence of this federal law, you wish to waive your right of access in expectation that it may produce a more candid evaluation, please check statement A below. If you choose not to waive your right of access to this information, please check statement B below.</p> <p><input type="checkbox"/> A. I waive my right of access to this recommendation and authorize the author of this recommendation to provide an evaluation of me to John Carroll University.</p> <p><input type="checkbox"/> B. I do not waive my right of access to this recommendation, but authorize the author of this recommendation to provide an evaluation of me to John Carroll University.</p>	
Signature	Date
TO BE COMPLETED BY THE RECOMMENDER	
Name:	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> Title: </div>
Address: _____	
Email: _____ Phone: _____	
<p>How long have you know the applicant?</p> <p> <input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1 – 2 years <input type="checkbox"/> 2 – 3 years <input type="checkbox"/> 3 – 5 years <input type="checkbox"/> More than 5 years </p>	
Signature	Date
<p>Please attach a letter of recommendation, preferably on letterhead. Describe in some detail your judgment of the applicant's ability to undertake and succeed in graduate studies. Please include the capacity in which you have known the applicant and any other pertinent details that would help us assess the candidate's potential as a graduate student.</p>	

PLEASE RETURN THIS FORM AND YOUR RECOMMENDATION LETTER TO:

gradbusiness@jcu.edu OR

Graduate Business Programs | Boler School of Business | John Carroll University
1 John Carroll Boulevard | University Heights, OH 44118 | 216.397.1970