

PHI KAPPA PHI

LETTER OF RECOMMENDATION REQUEST FORM

THIS SECTION TO BE COMPLETED BY APPLICANT

Name of Applicant _____

Recommendation Requested of _____

I hereby waive my rights of access to this confidential evaluation report, as provided in the Family Educational Rights and Privacy Act of 1974. *(optional)*

Applicant's Signature

Date

PROVIDING A LETTER OF RECOMMENDATION

The individual named above has identified you as someone who knows and can evaluate his or her qualifications for a Phi Kappa Phi Fellowship.

I have known the applicant for a period of _____ years and/or _____ months.

I have served as the applicant's: teacher in one class teacher in several classes department chair
 academic advisor other (please explain): _____

Among approximately _____ senior students I have known in this field over the past _____ year(s),

I would rank this applicant in the upper _____ %.

In approximately **500 words or 3500 characters** (min. 10 point font), please indicate your impressions of the applicant's (1) scholarship with particular reference to capacity for original work as a graduate student and (2) character and personality attributes, or other observations that will assist in appraising the applicant's probable success in advanced study and in potential career contributions. We recommend that due to limited space, it is best not to repeat information that is already available to the reviewers, such as the applicant's GPA, institutions attended, etc. **Please note that any additional pages beyond the 1-page limit will be removed prior to the review.** Reviewers are likely not specialists in the field and comments about the applicant's research should take that into consideration. Provide the **typed** letter of recommendation on your letterhead. Please complete this form and include it with your letter.

Signed _____ Title _____ Date _____