

## CONFIDENTIAL ACADEMIC RECOMMENDATION

MASTER OF EDUCATION FULL-TIME

App	olicant: Please com	plete this section	on before prese	enting to refer	ee						
	e of Applicant:										
		First		Middle		Student # or OUAC Ref. #					
Pofe	e <b>ree:</b> We would a	annracieta vaur	appraisal of the	a above applie	ant for a Maata	r'a dagraa in t	he field of Ed	usation The			
Nere		ippreciate your in the report wi			ant for a Maste	r's degree in t	ne neia oi Eai	ucation. The			
1.	How long have you ki	nown the applic	ant? (MM/YY)	Erom:		to					
2.	In what capacity?			From:		ιο					
3.	Indicate with an 'X' yo field of Education:	our evaluation o	f this applicant	with respect to	o their ability to	complete a gr	aduate progra	m in the			
			Fundling	Very	0	F-i-	Dana	No Basis for			
	Intellectual Capacity		Excellent	Good	Good	Fair _	Poor	Comment			
	Scholarly Potential		П								
	Originality										
	Critical Judgment			П		П	П				
	Oral Expression			П		П	П				
	Written Expression			П	П		П				
	Initiative			П	П		П				
	Work Habits				П						
	Perseverance										
								1			
4.	In comparison with ot	her students at	the applicant's	level, indicate	e where you wo	uld place this	applicant.				
	Among the top	□ 5%	<b>□</b> 10%	□ 25%	□ 50%		lower than 50	1%			
	Please attach a curre their ability to succeed										
	A comprehensive lette						scrioiaisiip c	onsideration.			
	<u> </u>										
	e Referee:	<i></i>									
	Recommendation is of ture over the seal. Yo										
	ments directly to the										
Name:					_Institution:						
F 16				A .l.l.							
Facult	ty:			Addr	ess:						
Position	on:			<u> </u>							
Siana	turo:			Data							
Signature:				Date	Date:						
Telephone Number:					Email address:						

Protection of Privacy: Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs". Additionally, personal information may be used by University staff in many offices on a "need to know" basis to identify and contact students who require their services.



## **CONFIDENTIAL** PROFESSIONAL RECOMMENDATION

MASTER OF EDUCATION **FULL-TIME** 

Surname	First	Middle			Г	Childont # or OLIAC Dof #					
ourname	Tilst	Middle				Student # or OUAC Ref. #					
	e your appraisal of the a port will be considered c		nt for a Ma	aster's deg	ree in the	e field of Ed	ucation. The				
Professional Relationship to ap	plicant										
Period of relationship upon which	ch assessment is based	ed From: to									
Indicate with an 'X' your evalua	tion of this applicant in c			performing		duties.					
		Excellent	Very Good	Good	Fair	Poor	No Basis fo				
Professional Knowledge and Abi	lity										
Leadership Qualities											
Teaching Ability											
Professional Relationships with	. Colleagues										
	Students										
	Public										
Oral Expression											
Written Expression											
Reliability of Performance		П	П	П	П	П					
Familiarity with Current Theory &	Practice										
In comparison with others perf	In comparison with others performing similar professional duties, how would you rank this applicant.										
<u> </u>	•		, , ,								
Among the top 5%	<b>□</b> 10%	□ 25%	<u> </u>	0%	☐ lower than 50%						
Please attach a current letter o their ability to succeed at the M A comprehensive letter will be	lasters level. This letter	will be used f	or admiss	ion purpos							
the Deferen							ad versita va es				
the Referee: is Recommendation is confident gnature over the seal. You can ei cuments directly to the Admission	ther return the envelop	e to the appl	icant to s	ubmit with	n their ap	oplication o	r email the				
is Recommendation is confident mature over the seal. You can eigon cuments directly to the Admission	ther return the envelop ons Office, sent from ye	e to the appl	icant to s onal emai	ubmit with	n their ap	oplication o	r email the				
is Recommendation is confident gnature over the seal. You can ei	ther return the envelop ons Office, sent from y	e to the apploour profession Company/Sch	icant to s onal emai	ubmit with	n their ap	oplication o	r email the				
is Recommendation is confident gnature over the seal. You can eig cuments directly to the Admission	ther return the envelop ons Office, sent from y	ne to the apploour profession  Company/Schorganization:	icant to s onal emai	ubmit with	n their ap	oplication o	r email the				

Protection of Privacy
Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs\*. Additionally, personal information may be used by University staff in many offices on a "need to know" basis to identify and contact students who require their services.