

# RECOMMENDATION FOR ADMISSION

## UNA M.A. in History

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Applicant Name: \_\_\_\_\_

**Directions to Reference Provider:** Please complete this recommendation form electronically and email it to [sfranklin@una.edu](mailto:sfranklin@una.edu). Please rate the applicant in comparison with other persons who have worked for or with you, according to the following scale:

| 4 = Excellent<br>Highest 10%                                                                                          | 3 = Good                 | 2 = Fair                 | 1 = Poor<br>Lowest 25%   | NA – Not applicable<br>Haven't Observed |                          |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-----------------------------------------|--------------------------|
|                                                                                                                       | 4                        | 3                        | 2                        | 1                                       | NA                       |
| <u>Commitment</u> – works to accomplish goals of organization, energetic, does more than necessary, strives to excel. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Dependability/responsibility</u> – punctual, low absenteeism, completes assigned tasks when due.                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Competence</u> – performs effectively, desires to learn, recognizes limitations.                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Communication</u> – uses good writing and speaking skills.                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Cooperation</u> – works well with others, good human relationship skills.                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Flexibility</u> – willing to adjust and change plans, if necessary.                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Regard for others</u> – communicates concern and respect for others, respects differences in others.               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Tolerance for stress</u> – shows courage during trying circumstances, remains calm during stressful times.         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Self-discipline</u> – ability to manage time, skills, and energy.                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |
| <u>Self-directed</u> – minimum direction needed.                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                | <input type="checkbox"/> |

Relationship to applicant (e.g., supervisor, instructor): \_\_\_\_\_

Length of association with applicant: \_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reference's Name (please print or type)

Signature

Position

Date

Address

City

State

Zip Code

**For questions, please contact:**

Dr. Sarah Franklin  
Coordinator of Graduate Studies  
Department of History  
University of North Alabama  
[sfranklin@una.edu](mailto:sfranklin@una.edu)

If you wish to provide additional comments, please feel free to do so and include them in **this** electronic file.