



FARMER SCHOOL OF BUSINESS
VOICE OF AMERICA LEARNING CENTER
MIAMI UNIVERSITY * WEST CHESTER, OHIO

MBA Recommendation Form

To the Applicant

Please type or print the following information:

LAST NAME (FAMILY)

FIRST NAME (GIVEN)

MIDDLE

CURRENT ADDRESS

Request your recommender to return this form to you in a sealed envelope with his/her signature written across the seal. Return the sealed envelope to the MBA Program Office along with your essays and resume.

Waiver

Under the provision of the Family Educational Rights and Privacy Act of 1974, effective January 1, 1975, you have the right, if you enroll at Miami University, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please indicate whether you wish to waive this right by checking the appropriate box below. The Admission Committee places no value on your decision.

I waive my right of access to this recommendation form.

I do not waive my right of access to this recommendation form.

SIGNATURE

DATE

To the Recommender

The individual whose name appears above is applying for admission to the Miami University MBA Program. Your candid assessment of the candidate's potential success in both graduate business school and their career will greatly assist the Admission Committee in their deliberations.

Miami requires the applicant to gather individual forms and letters of recommendation and submit them with other supplemental application materials. After completing this recommendation, please send electronically via email listed below.

Thank you for your time and effort.

Miami Professional MBA Program Office
Voice of America Learning Center * 7847 VOA Park Drive * West Chester, Ohio 45069
Telephone: (513) 895-8876 * Email: mba@miamioh.edu * www.miamioh.edu/fsb/mba



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NAME OF RECOMMENDER

TITLE

EMPLOYER

ADDRESS

PHONE

EMAIL

SIGNATURE

DATE

Please answer the following questions on separate paper (preferably letterhead), either in letter form or by number, as shown below.

Include the applicant's name in the upper right-hand corner of each page.

1. How long have you known the applicant and in what context?
2. What are the applicant's principal strengths and talents? Has the applicant grown during the time of his/her exposure to you?
3. In what areas can the applicant improve? Has he or she worked on these areas?
4. Comment on the applicant's ability to work with others, including superiors, peers and subordinates.
5. What is your overall assessment of the applicant's potential for success as an effective upper-level manager?

Please rate the applicant on the qualities listed below, identifying here the group to which you are comparing the applicant:

	Below Average	Average Top 50%	Good Top 25%	Excellent Top 10%	Exceptional Top 2%
Analytical/quantitative.....	[]	[]	[]	[]	[]
Overall intellectual ability.....	[]	[]	[]	[]	[]
Oral communication skills.....	[]	[]	[]	[]	[]
Written communication skills.....	[]	[]	[]	[]	[]
Motivation/initiative.....	[]	[]	[]	[]	[]
Maturity.....	[]	[]	[]	[]	[]
Leadership ability.....	[]	[]	[]	[]	[]