

Recommendation for Interdisciplinary Ph.D. Study

UMKC School of Graduate Studies

PART I. TO BE COMPLETED BY THE APPLICANT The applicant should complete the items in PART I. and give this form to an individual well acquainted with his/her education and abilities. Selected referees should be qualified to speak on the applicant's potential ability to perform doctoral level study and research. Suggested referees are college faculty, faculty advisers, or other persons who have been in a position to observe the applicant's research skills or intellectual acuity.

Applicant's Name: _____ Social Security #: _____

Proposed disciplines of study: _____

Under the Family Educational Rights and Privacy Act of 1974, university students have the right to inspect their files upon request. Please designate whether you would like to retain or waive your right to review this recommendation.

I **retain** my right to read this recommendation.

I **waive** my right to review this recommendation.

Signature/Date: _____

Signature/Date: _____

PART II. TO BE COMPLETED BY THE PERSON WRITING THE RECOMMENDATION

[Please comment in detail regarding the applicant's potential for graduate study and the basis for your judgment. We are particularly interested in your assessment of this student's ability and motivation to carry on independent doctoral level study and research, evidence of creative talent, writing ability, and promise for a successful academic career. **Use the reverse side, or an additional sheet if necessary.** Because the University of Missouri-Kansas City is in compliance with Section 504 of the Rehabilitation Act of 1973, we discourage you from referring directly or indirectly to an applicant's handicap.]

Out of approximately _____ persons I have taught/advised at this educational level during the past _____ years, I would rank this applicant in the upper _____ percent on the basis of potential to achieve a doctoral degree.

Signature: _____ Date: _____

Name: _____ Date: _____

Institution/Organization and address _____

Respondent should mail this form directly to: UMKC School of Graduate Studies, 5100 Rockhill Road, AC300F, Kansas City, Missouri 64110-2499