UNIVERSITY OF WISCONSIN

PARKSIDE

Recommendation for MBA Applicant

Note to Applicant:

Please complete Part A of this form and give it to the individuals who will write your recommendations.

→Recommendations should be mailed or FAX to the Admissions Office, 900 Wood Road, Box 2000, Kenosha WI 53141. FAX number: (262) 595-2008

PART A

1. Applicant's NameLast	First	 M.I.
Lust	1 1150	141.1.
Employer		
I hereby (check one)		
Waive access to this recommendation Do not waive access to this recomme	ns which should be considered confidential.	
Signature of applicant	Date	
2. Recommender's Name		
Organization		
Position		
Business or Home Address		
Business or Home Telephone Number		

PART B

The applicant whose name appears on this form has applied for admissions to the MBA Program at the University of Wisconsin-Parkside. It is important both to applicants and to us that we know as much as possible about their aptitude and capacity for graduate business study. Please respond to the following questions regarding the applicant. We appreciate the input.

- 1. How long and in what capacity have you known the applicant?
- 2. What do you consider the applicant's outstanding strengths? Weaknesses?
- 3. If formerly or currently employed by you, please describe the applicant's responsibilities.
- 4. If currently employed by you, what are the expectations for growth for this applicant in your organization?
- 5. Please give us your appraisal of the applicant in terms of traits listed below. Please compare the applicant with others whom you know to have applied to graduate school or with individuals in your organization who are being considered for positions in senior management.

TRAITS	EXCEPTIONAL	EXCELLENT	GOOD	AVERAGE	POOR
Administrative Ability					
Ability to work with others					
Oral Communication Skills					
Written Communication Skills					
Ability to Analyze/Solve Problems					
Motivation for Continuing Education					