



To the Applicant

Please complete this section of the form and sign on the appropriate line. Give one form and a self-addressed, stamped envelope to each person who will serve as an evaluator. That person should return the form to you in the envelope you provided. You should include the signed and sealed envelope with your application materials.

Name

Please print or type

Last First Middle

Check one

- I waive the right to inspect this letter of evaluation. I understand that it will be kept confidential.
 I do not waive my right to inspect this letter of evaluation.

Signature of Applicant

Date

Confidentiality

The information requested below will be used for the sole purpose of the graduate admission decision and will be held in confidence.

Note to the Evaluator

The applicant named above is seeking admission to the graduate business program at the University of Wisconsin-Madison. Please complete the questions on this form as candidly as possible. Rate the applicant in comparison with his or her professional or academic peer group. You may also include a personal letter of recommendation.

1. How long and in what capacity have you known the applicant?

2. Evaluate the applicant's interpersonal and team work skills, including his/her ability to work with peers, subordinates and supervisors. Is the applicant an effective group member or does he/she work better individually? What role does the applicant assume within the group?

3. Does he/she perform well under stress and accept constructive feedback?

4. Please comment on areas in which the applicant may need improvements or growth.

5. The School of Business is committed to developing outstanding leaders who can inspire trust and confidence in others. Please comment on the applicant's behavior within your organization and in the community.

6. For non-native English speakers, please comment on the applicant's verbal and written English ability.

7. What is your opinion of the candidate's motivation and suitability for a career in management? What is your overall impression of the applicant?

8. Place an "X" in the box that most accurately reflects the applicant's character and ability.

	Exceptional Top 2%	Outstanding Top 10%	Very Good Top 20%	Good Top Third	Average Middle Third	Below Average Bottom Third	No Opportunity to Observe
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall impression of applicant for graduate study in business

Outstanding Strong Average Marginal Uncertain

Applicant's potential for a career in business

Outstanding Strong Average Marginal Uncertain

To what extent have you and the applicant discussed his/her decision to pursue a graduate degree?

Extensively Somewhat When form presented Not at all

Name _____ Title _____

Organization _____ Telephone _____

Complete Address _____
Street City State Zip
