

THE DEPARTMENT OF
Educational Leadership
 UNIVERSITY OF MONTANA

Internal Letter of Recommendation Form

Please email this form directly to your EDLD faculty member(s) of choice once complete.

Applicant Must Complete This Section		
Name of applicant:	Date:	
Program applying to:	Ed.S. in Educational Leadership Ed.D. in Educational Leadership Ph.D. in International Educational Leadership	Principal Licensure Certificate Superintendent Licensure Certificate

Please identify which course(s) you have taken from this instructor:

Course	Semester	Grade Received

Note: Once this request form has been submitted, you will not be able to see the instructor's internal feedback.

EDLD Faculty Member Must Complete The Below Sections	
Name of recommender:	
<input type="checkbox"/> I recommend admission without reservation. <input type="checkbox"/> I recommend admission with reservations. <input type="checkbox"/> I do not recommend admission.	
Recommender's Signature:	Date:

Compared to the applicant's peers, please rate the applicant on the following qualities:			
	Lower 1/3	Middle 1/3	Upper 1/3
Academic potential			
Initiative & follow through			
Communication skills			
Mature judgment			
Interpersonal skills			

Interaction with faculty	<input type="checkbox"/> Professional	<input type="checkbox"/> Concerns	<input type="checkbox"/> Unprofessional
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