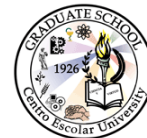




**CENTRO ESCOLAR UNIVERSITY
GRADUATE SCHOOL**



R E C O M M E N D A T I O N

A. Applicant. May we request you to please fill- out the form below. This form will serve as your assessment of the applicant's readiness to apply for admission in the graduate school. Kindly enclose in a signed envelope your accomplished form. Thank you.

Applicant's Name: _____

Family Name, First Name, Middle Name

Highest Educational Attainment: _____ Year Graduated: _____

School: _____ Planned Term & Year of Admission in GS: _____

Degree /Program Applying for: Master MA MS Ph.D. Major: _____

Recommender's Name: _____

School/Company Affiliation: _____ Position: _____

School/Company Address: _____

B. Recommender. Please tick a box to answer the question below.

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

1-2 years 7-8 years as Dean as Colleague

3-4 years 9-10 years as Professor

5-6 years more than 10 years as Employer

Please rate the applicant based on the following attributes:

Attributes	Excellent	Superior	Satisfactory	Fairly Satisfactory
Academic Performance				
Intellectual Potential				
Interpersonal Relationship				
Motivation for Graduate Study				
Research Capability				
Self- Management Skills				
Communication Skills				
Problem-Solving Skills				
Technological Skills				
Adaptability				
Goal- oriented				
Tenaciousness				
Strength of Work Ethics				

Do you recommend this applicant to the Graduate program? Yes No

Supplementary Comments: _____

Printed Name and Signature

Date

Contact No: _____

E-mail Address: _____

Copy to: Graduate School

AAF-GS 039

03/01/2019