MFA PROGRAM RECOMMENDATION
LOUISIANA TECH UNIVERSITY

To: _____ I, _____
   (Recommender)   (Applicant)

request that you submit a recommendation on my behalf   Major Area _____

( ) I waive access to this information   ( ) I request permission to read this information.

I have known this applicant for _____ years. My acquaintance with the applicant can be best described as:
( ) Very well acquainted ( ) Well acquainted ( ) Casually acquainted ( ) Student in 1 or 2 classes

I rate the applicant of a pool of more than ____ individuals (graduating senior or others) I have instructed or worked with over the past _____ years.

Factors	Outstanding Top 02%	Excellent Top 05%	Very Good Top 15%	Above Average Top 50%
Creativity				
Intellectual Curiosity				
Communication skills (oral)				
Communication skill (written)				
Breadth of Academic Knowledge				
Research Skills				
Motivation				

Use the space for a summary statement. Attach a separate sheet if necessary.

Signature: _____   Return to:
   Name: _____   Marie Bukowski, Graduate Coordinator
Address: _____   School of Art
         _____   Louisiana Tech University
         _____   P.O. Box 3175 Tech Station
   Phone: _____   Ruston, Louisiana 71272