



**Request for Recommendation
Concurrent B.A./M.A. – Germanic Studies**

I. To the applicant: Complete Section I. One form should be given to each recommender.

_____ Is applying for admission to the
Last Name First Name Middle Maiden (optional)
concurrent B.A./M.A. program in Germanic Studies at the University of Colorado at Boulder and has listed you as a reference on his or her application.

Under the Family Educational Rights and Privacy Act of 1974, students who are admitted and who matriculate into the program to which they apply are given the right to inspect their records, including their letters of recommendation, unless they have waived their right of review.

You have the option of (1) signing the following waiver or (2) declining to do so.

- ☐ 1. I expressly waive any rights I might have to access this letter of recommendation under the Family Educational Rights and Privacy Act of 1974.

Signature Date

- ☐ 2. I do not agree to the waiver above.

Signature Date

II. To the recommender: Before you agree to submit a recommendation, please review the reference to the federal law entitled the Family Educational Rights and Privacy Act of 1974 as presented above in our instructions "To the applicant."

We solicit your candid evaluation of the applicant's preparation for concurrent B.A./M.A. study, range of abilities and accomplishments, and creative and intellectual promise. **On the back of this form, or on your own stationery, please summarize your opinion of (a) the quality of the applicant's academic or creative achievements, including material not apparent on the official transcripts; (b) the applicant's scholarly or creative potential and promise for advanced and original work; (c) those aspects of the applicant's personality and character significant to graduate study; and (d) the applicant's special skills and experience where demonstrated in an art, vocation, or profession.** We would appreciate knowing the extent of your contact with the applicant and any special opportunities you may have had to observe him or her.

Recommenders Signature _____ Date _____

Name (printed) _____ Title _____

Address _____

Recommender please return this form to:

Attn: Graduate Program Assistant
Department of Germanic and Slavic Languages and Literatures
University of Colorado at Boulder
276 UCB, McKenna 129
Boulder, CO 80309