



Request for Letter of Recommendation

Referee please submit all materials directly to
Graduate Admissions Committee
Department of History and Geography
Columbus State University
4225 University Avenue
Columbus, GA 31907

1. STUDENT APPLICANT INFORMATION

Students please fill out top portion - *please print or type clearly*

Name of applicant: _____

Email: _____

Are you applying to a specific concentration? If so, please check:

M.A. in History M.A. in History – Race, Ethnicity, and Society Concentration

I waive the right to inspect this confidential recommendation when it becomes part of my file at Columbus State University. I understand that according to the Family Educational Right and Privacy Act of 1974 this waiver is optional.

Signature of Applicant _____ Date ____/____/____

2. Instructions for Evaluators

Please provide a **letter on departmental letterhead** evaluating the applicant's preparation and aptitude for graduate study in history. Your letter should explain how long and in what capacity you have known the applicant and provide a detailed assessment of his or her qualifications for carrying out advanced research, study, and writing. It would be particularly helpful if you could elaborate on the rankings below by assessing the applicant's academic strengths and weaknesses relative to other students you know who have pursued advanced studies. Please attach your letter to this coversheet and mail to the Graduate Admissions Committee, Department of History and Geography, Columbus State University, 4225 University Avenue, Columbus, GA 31907. **Application deadlines are May 15 for summer start, June 30 for fall start and November 30 for spring start.**

Please compare the student to his or her peers at your institution:

Overall Preparation: top 5% top 10% top 20% top 35% top 50%

Analytical Ability: top 5% top 10% top 20% top 35% top 50%

Intellectual Creativity: top 5% top 10% top 20% top 35% top 50%

Written Expression: top 5% top 10% top 20% top 35% top 50%

Writing Quality: top 5% top 10% top 20% top 35% top 50%

Signature _____ Date _____

Printed Name _____ Institution and Title _____