

To the Applicant—*Print responses to items 1-6 and then give this form to the person you are asking to recommend you.*

1. Name _____
last name first name middle
2. Date of Birth _____
3. Department/ program (as it appears on the *Graduate Admission Information* page for your department) _____
4. Name of your evaluator _____
5. Buckley Amendment Waiver
 - I waive my right of access provided by the Family Educational Rights and Privacy Act of 1974 to view this recommendation form in my file.
 - I do not waive my right of access to view this recommendation form in my file.
6. Signature _____ Date _____

To the Evaluator—*Please attach a letter of recommendation printed on letterhead to assist us in judging this applicant's potential for graduate study. This letter should include the basis for your judgment and your association with the applicant. We are particularly interested in your assessment of this student's strengths and weaknesses as well as his or her ability and motivation to succeed in graduate school. Please mail this form and your letter to the department or program listed above in item 3, The University of Iowa, Iowa City, IA 52242.*

signature

date

position or title