TAUBMAN COLLEGE OF ARCHITECTURE + URBAN PLANNING
BACHELOR OF SCIENCE RECOMMENDATION FORM

Instructions for the applicant—Complete **PART 1**, and submit this form to a recommender that knows you well.

PART 1 To be filled out by the applicant

Name: _____
last first middle

U-M ID number (if known): _____ Gender: _____

Birth date: _____
month/day/year

Instructions for the applicant: Under the provisions of the Family Education Rights and Privacy Act of 1974, you (if admitted and enrolled) will have access to the information provided unless you have waived such access. **Please indicate your preference below and give this form, along with a pre-addressed envelope, to the recommender.**

☐ I hereby waive my right of access to this recommendation. _____ _____ / _____ / _____
SIGNATURE MONTH DAY YEAR

☐ I DO NOT waive my right of access to this information. _____ _____ / _____ / _____
SIGNATURE MONTH DAY YEAR

PART 2 To be filled out by the recommender

Name: _____
last first middle

Title: _____ Email: _____

What subjects have you taught this student? _____

PART 3 To be filled out by the recommender

Please provide candid evaluations and relevant information concerning the applicant. Your assistance is sincerely appreciated. Upon completion, please attach your word document (on letterhead) to this form and mail directly to:

Attention: Office of Undergraduate Admissions, 515 E. Jefferson St., 1220 Student Activities Building, Ann Arbor, MI 48109-1316

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

What do you consider to be the strengths of the applicant?

What characteristics of the applicant do you feel are in need of improvement?

PART 3 To be filled out by the recommender

Please compare this applicant with other individuals you have know at a similar stage in their careers.

	Top 5%	Very Good	Average	Marginal	Poor	Not Observed
Intellectual Ability	☐	☐	☐	☐	☐	☐
Breadth of General Knowledge	☐	☐	☐	☐	☐	☐
Analytical Ability	☐	☐	☐	☐	☐	☐
Ability to Apply Analytical Skills to Problem Solving	☐	☐	☐	☐	☐	☐
Ability to Communicate Orally	☐	☐	☐	☐	☐	☐
Ability to Communicate in Writing	☐	☐	☐	☐	☐	☐
Ability to Communicate Visually/Graphically	☐	☐	☐	☐	☐	☐
Capacity for Hard Work	☐	☐	☐	☐	☐	☐
Imagination and Creativity	☐	☐	☐	☐	☐	☐
Ability to Work with Deadlines	☐	☐	☐	☐	☐	☐
Ability to Work with Others	☐	☐	☐	☐	☐	☐
Motivation and Perseverance Toward Goals	☐	☐	☐	☐	☐	☐
Leadership and Organizational Skills	☐	☐	☐	☐	☐	☐
Potential for Professional Growth	☐	☐	☐	☐	☐	☐
Overall	☐	☐	☐	☐	☐	☐

Please provide additional comments, if necessary, on the academic ability and promise of the applicant.

Recommender's Signature _____ _____ / _____ / _____
SIGNATURE MONTH DAY YEAR

School, Agency, or Firm _____
NAME OF ORGANIZATION