



## RECOMMENDATION AND REFERENCE FORM

Office of Admissions

University of Management and Technology

1901 North Fort Myer Drive, Suite 700, Arlington, VA 22209, USA

Website: [www.umtweb.edu](http://www.umtweb.edu) Email: [admissions@umtweb.edu](mailto:admissions@umtweb.edu)

Please provide this form to your referee and have him or her fill it out and return it directly to UMT's Office of Admissions.

### SECTION 1 (TO BE COMPLETED BY THE APPLICANT):

Applicant Information (please print or type)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

*By giving this form to a referee, I am aware that under the Congressional Family Educational Rights and Privacy Act of 1974 [Sec. 438(a)(20)(B)c(c)], I am not required to, but that I voluntarily waive my right to access to confidential letters and statements of recommendation submitted to University of Management and Technology in support of my application to the university. I further understand that under the provisions of the Family Education Rights and Privacy Act, an unsuccessful applicant, regardless of whether such applicant has signed a waiver, has no right to inspect any of the admission application materials accumulated in his/her file. The giving of a waiver shall not be regarded as a condition for admission to the university.*

I hereby:  do  do not waive my rights of access to any and all letters or statements of recommendation which may be submitted by \_\_\_\_\_ (Applicant must specify the name of person submitting recommendation before sending a form to that person) in connection with my application to University of Management and Technology.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 2 (TO BE COMPLETED BY THE REFEREE):

On behalf of the Office of Admissions, thank you for taking time to participate in the student recommendation process.

Please return the completed form by mail to: *Office of Admissions, University of Management and Technology, 1901 North Fort Myer Drive, Suite 700, Arlington, VA 22209, USA, or directly email it to [admissions@umtweb.edu](mailto:admissions@umtweb.edu).*

1. How long have you known the Applicant named above? \_\_\_\_\_
2. What is your relationship with the Applicant? \_\_\_\_\_
3. How do you rate the Applicant on the following criteria? (Please check the appropriate boxes)

	Excellent	Very Good	Good	Average	Unsatisfactory	Unobserved
Competence in his/her field						
Integrity						
Motivation						
Commitment to the task at hand						
Innovative ability						
Ability to work in a team						
Verbal skills in English						
Written communication skills in English						

**Additional Comments:**

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**Name of the person who completed this form:** \_\_\_\_\_

**Position/Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_