

## Master of Music Confidential Recommendation Form

RECOMMENDATION FO	RM FOR					_	
	STUD	ENT ID #_					
The applicant whose name ap University Master of Music p completing this form. Your tir appreciated. This recommend stating s/he wishes to view it.	rogram. Please gi me and effort invo ation will be held	ve a candid of the confidence	evaluation of paring this re se unless a le	f the applica commendat etter from th	nt's capabilities by ion are greatly e applicant is attac	y	
	d .	Above		Below	No		
Scholastic Aptitude Knowledge of the Field Writing Skills Cooperativeness Initiative/Motivation Emotional Maturity Integrity	Superior	Average	Average	Average	Information		
How long have you known the	e applicant?						
In what capacity have you kno	own the applicant	?					
What is the probability of the	candidate's succe	essful comple	etion of the I	Master's pro	gram? Please chec	ck one	
Unlikely	Possible		☐ Very likely		Almost Cer	rtain	
GENERAL STATEMENT: P consider relevant. Also please complete a Master's degree of necessary)	e describe any res	ervations yo	u have abou	t the applica	nt's ability to	•	
Name and Title (please print of	or type)					_	
School/Firm							
Address	ddress			Phone Number			
Signature	nture Date					_	