

Recommendation Form - Confidential

PhD in Counseling PhD in Curriculum and Instruction PhD in Leadership and Education

INFORMATION PROVIDED BY APPLICANT

Applicant's Name _____
Last First Middle

Social Security Number (*Used for identification purposes only*) _____ or Barry ID Number _____

Intended Program:

- PhD in Counseling with Specialization in Marital, Couple, and Family Counseling/Therapy
- PhD in Curriculum and Instruction (*Check Area of Specialization*)
 - Culture, Language, and Literacy (TESOL) Curriculum Evaluation and Research
 - Early Childhood Education Elementary Education Reading, Language, and Cognition
- PhD in Leadership and Education (*Check Area of Specialization*)
 - Exceptional Student Education Higher Education Administration Human Resource Development Leadership

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974

The purpose of this recommendation is to assist in making the admission decision and, if you are admitted and enrolled, to aid in your academic advising. Under the provisions of the act, you have the right, if you enroll at Barry, to review your educational records. The act further provides that you may waive your right to see recommendations for admission. You must check the appropriate box indicating whether you wish to waive this right and sign your name.

- I waive any right of access I may have to this recommendation form.
- I do not waive any right of access I may have to this recommendation form.

Signature _____ Date _____

It is the responsibility of the applicant to distribute this form and request recommendations in support of his/her application for doctoral study, and follow up to ensure submission of required information.

TO THE RESPONDENT

Please do not complete this form unless the above section is entirely complete including indication of waiver and signature of the applicant.

The above-named individual has applied for admission to the Barry University doctoral program. Please comment on this individual in relation to the following:

1. Intellectual capacity to engage in scholarly activities

2. Skill in written communication

3. Skill in verbal communication

4. Achievement in previous academic programs

5. Awareness of critical professional issues

6. Potential for contributing to the profession

7. Potential for providing leadership in his/her chosen field

8. Other

9. I recommend this applicant:

Not at all
1 2 3

Moderately
4 5 6

Enthusiastically
7 8 9

Signature of the Respondent _____

Relationship to Applicant _____

Name _____ Date _____

Title _____ Phone (____) _____ Ext. _____

Company/Institution _____

Address _____

Please mail form directly to:



BARRY
UNIVERSITY

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Office of Financial Aid: 305-899-3100
Toll-free Admissions and Financial Aid: 800-695-2279
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www.barry.edu/education