

product design

Letter of Recommendation

Application Deadline January 15

BA/BS Material + Product Studies

BFA Product Design

Student Name

Your Name

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

2. Please rate the applicant in terms of potential for high achievement in a professional degree program.

Place a check mark in the appropriate box on the chart below.

	Unable to Judge	Poor	Below Average	Average	Above Average	Excellent	Truly Exceptional
Intellectual Capability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Express Self Orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Express Self in Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability with Visual or Graphic Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work in Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follow-through/Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination and Creative Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breadth of General Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[The Family Educational Rights and Privacy Act of 1974 gives students, once admitted and enrolled, right of access to records, including letters of reference]

3. This candidate is applying to the Product Design Program at the University of Oregon. What are your impressions of the applicant's preparation for collegiate academic study, such as: personal character, creative ability, maturity, responsibility, and accomplishments? Use a separate sheet if necessary.

4. Recommender Information

Your Name	<input type="text" value="last"/>	<input type="text" value="first"/>
Title/Company	<input type="text"/>	
Address	<input type="text" value="no. + street"/>	
	<input type="text" value="city"/>	<input type="text" value="state"/>
Signature	<input type="text"/>	

5. Return this form to the student, or mail directly to:
Product Design Program Admissions, 5282 University of Oregon, Eugene OR 97403-5282.