

Recommendation Form

Mandel Center for Nonprofit Organizations • Case Western Reserve University

Name of Applicant _____
(first name) (middle name) (last name)

Current Address _____

Applicant is applying to the following program:

___ MNO ___ MNO-Executive Option ___ JD/MNO ___ MSSA/MNO
___ CNM ___ MBA/CNM ___ JD/CNM ___ MSSA/CNM

Name of Evaluator _____

This section should be completed by applicant prior to sending this form to reference respondents:

The Family Education Rights and Privacy Act of 1974 and its amendments guarantee students access to their educational records. Students may, however, waive their right of access to recommendations. The choice of the applicant regarding this recommendation is to be indicated below. Failure to sign will constitute acceptance of limited access.

_ I do waive my right to inspect the contents of the following recommendation.

_ I do not waive my right to inspect the contents of the following recommendation.

Signed _____ Date _____

Applicant

1. Please complete the information above.
2. **If you waive your right to inspect your recommendations**, please type or print the following address clearly on the front of two envelopes: Office of Admissions, Mandel Center for Nonprofit Organizations, 10900 Euclid Avenue, Cleveland, OH 44106-7167. Mail the Recommendation Forms (both pages) and envelopes to the two (or three if applying to the MNO-Executive Option) individuals you have asked to provide an evaluation as part of your application. If you do **not** waive your right to inspect your recommendations, the envelopes sent to your recommenders should be addressed to you, and you may send them to the Mandel Center with your other application materials.
3. You may solicit more than the two (or three if applying to the MNO-Executive Option) required evaluations if, in your opinion, the information they provide would significantly affect the consideration of your application. Please photocopy one of the blank recommendation forms to obtain the additional number of forms you require.

Evaluator

The individual whose name appears above is applying for admission to a graduate program at the Mandel Center for Nonprofit Organizations at Case Western Reserve University. The chart located on the back of this form suggests the kind of information that we find useful, but feel free in your written assessment to use any format you may find appropriate. This recommendation is an important part of the candidate's evaluation, and no action on the application will be taken until this form is received by the Admissions Office. Thank you very much for your time and effort.

Evaluator Information (Please Print or Type)

(name)

(position or title)

(organization)

(street address)

(state)

(country)

(zip code)

(telephone)

(signature)

(date)

1. For how long and in what capacity have you known the candidate? (Please give exact dates.)
2. Please rate the applicant on the characteristics below by placing a number from 1 (poor) to 5 (excellent) (or N/A if you do not know, or it is not applicable) in the box next to each item. Indicate here the reference group with whom you are making comparisons:

Employees

Students

Volunteers

Other

Characteristic	Rating	Characteristic	Rating
Oral communication skills		Maturity	
Written communication skills		Creativity/innovativeness	
Ability to work with others individually, or in groups (circle one)		Motivation and seriousness of purpose	
Passion for, and commitment to, the nonprofit sector		Analytical skills	
Flexibility/adaptability		Leadership potential	
Integrity/honesty		Potential for future growth in the chosen field	
Reliability		Ability to meet deadlines	

3. We would be grateful for your candid assessment of this applicant's potential for achievement, both in the graduate program and in a nonprofit managerial career. Please comment on the applicant's interpersonal and communication skills, and his/her experience in the nonprofit sector. Please also describe specific activities, accomplishments, or roles that demonstrate this candidate's strengths and shortcomings. (Attach a separate page.)

4. If English is a second language for this applicant, please comment on the applicant's ability to express himself/herself in written and spoken English. Provide specific examples, if possible. You may attach a separate page.

5. Please check one of the following to indicate the degree of your overall evaluation of this applicant with regard to graduate study at the Mandel Center for Nonprofit Organizations.

Strongly recommend Recommend Recommend with reservations Do not recommend

6. Depending upon which address is indicated on the envelope provided to you by the applicant, please return this form either to the Mandel Center, or the applicant. Please seal the envelope and place your signature across the flap. Your prompt response is appreciated.

For assistance in completing this form, please call (216) 368-6025 or (800) 435-6669.