

Recommendation Form

This form is not needed if the recommendation has been submitted electronically.

Section 1: To be completed by the applicant:

Name _____
Family (Last) Name Given (First) Name Middle Name

Intended Degree _____ **Intended Major** _____
(BM, MA, MM, DMA, PhD, or MA/PhD) (Applied Music, Theory, Music Education, etc.)

Instrument/Voice type _____
(Flute, Piano, Soprano, etc. Only list instrument(s) on which you are auditioning for a degree program.)

Graduate Applicants: Indicate here the **Graduate Awards** for which you are applying _____

In accordance with the provisions of the Family Educational Rights and Privacy Act (FERPA), the following report is to be regarded as:

- Confidential.** I waive my right of review.
 Non-Confidential. I retain my right of review.

Applicant's Signature _____ **Date** _____

Section 2: To be completed by the recommender:

Name _____

Title or position _____

Address _____

Phone number _____ City _____ State _____ Zip _____ Country _____
E-mail address _____

Please describe how long you have known the applicant, and in what capacity. Include dates, as relevant.

The following information will give us a clearer assessment of the applicant's overall ability and talent. Please evaluate the applicant in comparison with others whom you have known in a similar situation:

- | | | | | | | |
|------------------------|---------------------------------|----------------------------------|----------------------------------|----------------------------------|-------------------------------------|--|
| Performance Abilities: | <input type="checkbox"/> Top 1% | <input type="checkbox"/> Top 10% | <input type="checkbox"/> Top 20% | <input type="checkbox"/> Top 50% | <input type="checkbox"/> Bottom 50% | <input type="checkbox"/> No basis for judgment |
| Academic Abilities: | <input type="checkbox"/> Top 1% | <input type="checkbox"/> Top 10% | <input type="checkbox"/> Top 20% | <input type="checkbox"/> Top 50% | <input type="checkbox"/> Bottom 50% | <input type="checkbox"/> No basis for judgment |
| Talent: | <input type="checkbox"/> Top 1% | <input type="checkbox"/> Top 10% | <input type="checkbox"/> Top 20% | <input type="checkbox"/> Top 50% | <input type="checkbox"/> Bottom 50% | <input type="checkbox"/> No basis for judgment |
| Application: | <input type="checkbox"/> Top 1% | <input type="checkbox"/> Top 10% | <input type="checkbox"/> Top 20% | <input type="checkbox"/> Top 50% | <input type="checkbox"/> Bottom 50% | <input type="checkbox"/> No basis for judgment |
| Achievement: | <input type="checkbox"/> Top 1% | <input type="checkbox"/> Top 10% | <input type="checkbox"/> Top 20% | <input type="checkbox"/> Top 50% | <input type="checkbox"/> Bottom 50% | <input type="checkbox"/> No basis for judgment |

(Also Complete Page 2)

Section 3: Recommendation for applicants to the:
Bachelor of Music degree (BM)
Master of Music degree (MM)
Doctor of Music Arts degree (DMA)

Recommenders should attach a separate letter to this form providing information concerning the applicant's musical, academic and/or personal background which you feel will enable us to more accurately evaluate this applicant. If the applicant is applying for a graduate degree, please address his or her ability to accomplish independent study or research. If the applicant is applying for a Graduate Award (see section 1 of this form), please comment specifically regarding his or her ability to work or perform in the appropriate Graduate Award area of specialty if you able to do so. The Eastman School of Music appreciates and values a candid assessment of all candidates to assist us in our admission decision.

Section 4: Recommendation for applicants to the
Masters of Arts degree (MA)
Doctor of Philosophy degree (PhD)

On a separate document, please give a candid assessment of:

- The applicant's musical and scholarly preparation for graduate work at Eastman;
- The applicant's ability to pursue independent research;
- The applicant's motivation, maturity, self-confidence, and strength of commitment as it relates to the chosen field of study;
- The applicant's foreign language abilities in German, French and Italian (if known) and
- The applicant's potential as a teaching assistant, especially if applying for a Graduate Award (see Section 1 above).

Section 5. Signature

All recommendations are for the exclusive use of the Admissions Committee. Recommendations are used only in our Admissions Process and do not become part of the applicants' permanent files, should they matriculate.

Signature of Recommender

Date

Submitting this form

The applicant's right of access is noted on page one. If the applicant has waived the right of access, the recommender should place the recommendation in a sealed envelope and sign across the seal (to preserve confidentiality) before giving the recommendation to the applicant, or sending directly to the Admissions Office at the address below. Recommendations that are not confidential will be reviewed as such. **This form should be received in the Admissions Office by December 1.** Your timely response is appreciated and we sincerely thank you for your recommendation. Any questions may be directed by email to: admissions@esm.rochester.edu

Office of Admissions
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Fax: 585-232-8601