



## Recommendation Form

**INSTRUCTIONS TO THE APPLICANT:** Recommendation forms must be submitted either using the online recommendation system (preferred) or via email to [msw.recommendations@umich.edu](mailto:msw.recommendations@umich.edu) directly from the recommender. To use the online system, be sure to provide a correct and valid email address for each recommender on the Letters of Recommendation page of the MSW Online Application; indicate “yes” to the question, “Use online recommendation system?”; and click the “Submit Requests for Recommendations” button. **Sign only if you are waiving access as specified below.**

Under the provisions of the Family and Educational Rights and Privacy Act (FERPA), and applicable state law, you (if admitted and enrolled) will have access to the information provided below unless you waive such access.

**I hereby waive my right of access to the information contained in this recommendation.**

Signature of Applicant (check to sign)

Date: \_\_\_\_\_

**IF THERE IS NO SIGNATURE ABOVE, THIS RECOMMENDATION WILL BE TREATED AS NON-CONFIDENTIAL.**

\_\_\_\_\_  
Applicant's First, Middle, and Last Name

\_\_\_\_\_  
Recommender's Name

\_\_\_\_\_  
Applicant's Email Address

**INSTRUCTIONS TO RECOMMENDER:** The person named above is seeking admission to the Master of Social Work Program at the University of Michigan. Individuals who are accepted must be able to fulfill the intellectual requirements of the School and should possess personal qualifications essential to professional practice in social work. We greatly appreciate your assistance in our evaluation of this candidate. Please submit this completed form and any accompanying letter(s). Should you wish to submit a PDF in lieu of using the online recommendation system, directly email the completed form and any accompanying letter(s) to [msw.recommendations@umich.edu](mailto:msw.recommendations@umich.edu). Your email address must exactly match the email address listed on the applicant's MSW application.

- How long have you known the applicant? \_\_\_\_\_
- In what capacities have you known the applicant?  
 Professor     Research Supervisor     Academic Advisor     Supervisor     Field Instructor     Personal     Other
- Using as a base of comparison other individuals whom you have known in the same field in recent years, please indicate your evaluation of this applicant's ability and professional competence by selecting the appropriate column for each characteristic.

Characteristic	Exceptional Upper 5%	Outstanding Next 15%	Very Good Next 15%	Good Next 15%	Next 50%	No Basis for Judgment
Intellectual Capability						
Leadership Skills						
Sense of Responsibility						
Ability to Work with People						
Integrity						
Ability to Adapt to New Situations						
Ability to Make Sound Judgments						
Ability in Oral Communication						
Ability in Written Communication						
Concern for the Well-being of Others						
Motivation for Chosen Field						

4. Please indicate the strength of your overall recommendation by checking the appropriate box below:

Highly Recommended     Recommended     Recommended with Reservations as Noted Below     Not Recommended

5. It is very important to the School, in its evaluation, to have any additional comments which will assist in assessing the applicant's probability of success in pursuing graduate social work education and future professional social work practice. (Please feel free to include a separate letter in lieu of completing this section.)

Signature of Recommender (check to sign)

Date: \_\_\_\_\_

PRINTED Name of Recommender: \_\_\_\_\_

Title: \_\_\_\_\_

Business Name/Dept: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a University of Michigan Alumnus/a?  YES  NO

If yes, degree rec'd: \_\_\_\_\_

Do you have an MSW?  YES  NO

Do you have a PhD?  YES  NO

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***Thank you!***