

(continued)



To the Applicant

Each recommendation must include this form. Recommendations should be requested from ECE professors who are able to comment on your qualifications for PhD graduate study. They should not be requested from a non-academic person unless you have extensive work experience with that individual and/or you have been away from academic institutions for some time. Complete all sections of page 1 below and deliver this form directly to the recommender.

Applicant's Information			
Name:			
Last or Family Name/Surname	First	Middle	Date of birth
Address:		Degree sought:	
E-mail address:		<u></u>	
OSU ID:		Major field of study:	
List the name and address of the graduate program to which you a	are applying.		
Graduate Studies Committee Chair The Ohio State University			
(graduate program)			
Columbus, OH 43210 USA			
ECE Faculty Recommender's Information			
202 radaky redefinitionaet e information			
Name:			
Title:		Institution:	
List the courses you have taken under the direction of this recomm	nender:		
Course Number Course Title		When Taken	Grade
Applicant's Waiver of Right to Access			
Applicant's Walver of Right to Access			
The Family Educational Rights and Privacy Act of 1974, as confidential letters or statements written on his or her beha upon request, is notified of the names of all persons makin admission or award of fellowship or associateship. However,	alf if the recommendation is used s g such recommendations on his o	olely for the purposes of admission, employment, or the r behalf. The university does not require that you male	receipt of honors and if the candidate,
I hereby waive my right to access to this recommendat (insert name of recommender) on behalf of my applicat admission to the ECE PhD program.	ion and any appropriate attachn tion to the PhD program. This wa	nents which have been written by iver is effective insofar as the recommendation is use	ed solely for the purpose of
Printed Name:	Date:	Signature:	



The Ohio State University PhD Recommendation Form (cont'd)

To the Recommender:				
	the applicant as a student, pl	ease adapt items 3-4 b		nplete this recommendation, sign and return to the ECE Graduate le, and explain your knowledge and assessment of the applicant in
Applicant's Last or Family Name/Surname		First		Middle
What is your relationship with the applicant?	☐Teacher/Professor ☐ [Employer/Supervisor	Other	
Do you know the applicant well enough to give he (If you checked NO, you do not need to complete		☐Yes ☐No		
SUMMARY EVALUATION Compare the applicant with a representative group ability? (Check one.)	up of students with similar ex	xperience and training i	n the same field	. How do you rate the applicant on general research and scholarly
 □ outstanding (highest 5%—comparable for very good (highest 10%) □ good (upper 25%—ability easy to ident of average (upper 50%) □ below average (lower 50%) 				
RECOMMENDATIONS I would make the following recommendation for to strongly recommend recommend recommend with reservations do not recommend	he applicant's admission to	the program and degre	e listed on the fr	ont:
Describe the applicant's qualifications for • performance in independent study • intellectual independence • research interests • capacity for analytical thinking • ability to work with others • ability to organize and express idea • drive and motivation.	or in research groups	uss topics such as:		
Recommender, please sign below:				

Recommender, please sign below:		
Printed Name:	Date:	
Signature:		