

BEHAVIOR ANALYSIS & THERAPY PROGRAM

Rehabilitation Institute
Southern Illinois University at Carbondale
Carbondale, Illinois 62901-4609

RECOMMENDATION

Name of Applicant _____ Undergraduate University _____

Name of person requested to provide recommendation _____

Federal legislation provides me with a right of access, which may be waived, to this recommendation, and no school or person can require me to waive this right. I have voluntarily checked and signed the appropriate statement relative to my rights. I understand that my decision in no way will prejudice the review of my credentials by the faculty of the Behavior Analysis & Therapy Program.

_____ I hereby waive my right of access to this recommendation and authorize the person named above to provide a candid evaluation and all relevant information to the Behavior Analysis & Therapy Program.

Date _____ Signature _____

_____ I do not waive my right of access to this recommendation, but I authorize the person named above to provide a candid evaluation and all relevant information to the Behavior Analysis & Therapy Program.

Date _____ Signature _____

To those asked to submit recommendations:

Your recommendations will further assist the Admissions Committee to make the most appropriate decision on this candidate/applicant. Recommendations which detail the specific accomplishments and/or qualifications of this particular applicant will best assist us.

The above person is applying for graduate training at the master's level in Behavior Analysis & Therapy. Since this program is designed to prepare professionals to work with physically, socially and/or emotionally disabled persons, other professionals, and a variety of agencies, we would appreciate your impressions of the applicant on the following:

1. How long and in what capacity have you known the applicant?
2. How do you perceive the academic ability and potential of this candidate?
3. What practical related experience or thesis has the candidate had?
4. What are the writing skills of the applicant?
5. What are the research skills of the applicant?
6. What are the training/teaching skills of the applicant?
7. What are the political/social skills of the applicant?
8. How would you feel about working with this applicant over a long period of time?
9. Would you admit this student into a masters degree program?

Please use the reverse side of this sheet or additional sheets, if necessary; or you may simply wish to attach a letter to this form in addressing issues 1-9 above.

Signature _____ Position _____ Date _____

Name & Address _____

(Please return to above address)