LETTER OF RECOMMENDATION

PLEASE READ BEFORE FILLING OUT THIS FORM

This recommendation should be completed, in the first place, by a previous or current professor. If this is not possible, you may consider job or practicum supervisors. No recommendations from relatives, friends or from the Academic Director of the Program you are applying to will be accepted. Should the applicant request to exercise his/her right to see the document, he/she will be allowed to do so once it becomes part of his/her admission file.

TO BE COMPLETED BY THE APPLICANT:

NAME OF APPLICANT

PROGRAM YOU ARE APPLYING TO

Bachelor Programs: ☐ Psychology ☐ Speech and Language Therapy
Masters Programs: ☐ Ind./Org. Psych. ☐ Speech/Lang. Pathology ☐ Counseling Psychology
☐ School Psychology
Ph.D. Programs: ☐ Clinical Psych. ☐ Psych.- Consultation/Research/Teaching
☐ Industrial/Org. Psych.
Psy.D. Program: ☐ Clinical Psychology
Preparatory Courses: ☐ Psychology ☐ Speech and Language Pathology
Certifications: ☐ Graduate Certification in Autism ☐ Graduate Certification in Forensic Psych.
Other (please specify): ________________________________

(In compliance with Federal and State Statutes, the student has the right to examine this letter of recommendation when it becomes part of his application to the institution. Please indicate below if you wish to exercise this right.)

☐ I wish to exercise this right.
☐ I do not wish to exercise this right.

_________________________
Applicant’s Signature

TO BE COMPLETED BY THE PERSON MAKING THE RECOMMENDATION

The above mentioned applicant has given your name as a reference to the Admissions Committee of the Carlos Albizu University, San Juan Campus, San Juan, Puerto Rico.

We will appreciate your personal evaluation of the candidate.

1. How long have you known the candidate? ________________
   In what capacity? (Check as many as necessary)
   ☐ Undergraduate student ☐ As an employee
   ☐ Graduate student ☐ Other (please specify):
   ☐ Assistantship (academic or laboratory)

2. Please judge the candidate on the following factors. Afterwards, utilizing a scale from one (1) to seven (7) indicate, on the last column, the number that best represents the degree of confidence you ascribe to your judgment in each of those aspects. Number one (1) represents
“very unsure” and number seven (7) “totally sure”. In no way will the applicant be penalized if you express that you do not have sufficient data to adequately judge him or her.

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<th>Dimensions</th>
<th>Def.</th>
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<th>Insufficient data on which to judge the applicant</th>
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<td>1. Academic excellence</td>
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<td>2. Capacity for critical analysis</td>
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<td>3. Potential for research and work</td>
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<td>4. Originality</td>
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<td>5. Sense of responsibility</td>
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<td>6. Ability for written expression</td>
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<td>7. Ability for oral expression</td>
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<td>8. Commitment to the development of the discipline</td>
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<td>9. Ability to work with others</td>
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<td>10. Clinical performance (if applicable)</td>
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3. What limitations do you consider to be the most significant the candidate may face in pursuing graduate studies?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

4. Using as criteria other graduate students you have personally known, in what range or level would you place the applicant?

   Upper: ☐ 2% ☐ 5% ☐ 10% ☐ 25%

I recommend the applicant: ☐ Without reservations ☐ With reservations

Name __________________________________________
Signature ______________________________________
Position ______________________________________
Institution ____________________________________
Address _______________________________________
Date ___________________________________________

PLEASE FORWARD TO THE FOLLOWING ADDRESS:

Carlos Albizu University
Office of Admissions
P.O. Box 9023711
San Juan, Puerto Rico 00902-3711
Tel. (787) 725-6500 exts. 1514, 1521 and 1523

Rev. October 2016