

RECOMMENDATION FORM

Recommendation for:

_____ Applicant Last Name

_____ Applicant First Name

Note to Referee:

This recommendation form is provided for your convenience by the McGill MBAJapan program. In accordance with the privacy provisions of Quebec law, candidates may, upon request, have access to their recommendation once a decision has been rendered.

1. How long have you known the applicant and in what connection?

2. What special qualities does the applicant possess which leads you to support his/her application?

3. Please address the following components of the candidate's character. Cite specific examples where possible.

a) Intellectual abilities.

b) Administrative skills; ability to manage workload.

c) Ability to work effectively with others.

d) Ability to communicate in written and oral forms.

e) Leadership potential.

f) Initiative and follow-through.

4. Please rate the applicant on the six components:

	Outstanding (Top 2%)	Superior (Top 5%)	Excellent (Top 15%)	Good (Top 33%)	Average (Top 50%)	Below Average (Bottom 50%)	No Information
Intellectual abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administrative skills/workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work effectively with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate in written and oral forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative and follow-through	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall impression of candidate: Outstanding (Top 2%)
 Superior (Top 5%)
 Excellent (Top 15%)
 Good (Top 33%)
 Average (Top 50%)
 Below Average (Bottom 50%)

Date: _____

Referee's Name: _____

Position/Title: _____

School/Firm: _____